

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

STEPHEN McCOLLUM, and SANDRA §  
McCOLLUM, individually, and STEPHANIE §  
KINGREY, individually and as independent §  
administrator of the Estate of LARRY GENE §  
McCOLLUM, §

PLAINTIFFS §

v. §

BRAD LIVINGSTON, JEFF PRINGLE, §  
RICHARD CLARK, KAREN TATE, §  
SANDREA SANDERS, ROBERT EASON, the §  
UNIVERSITY OF TEXAS MEDICAL §  
BRANCH and the TEXAS DEPARTMENT OF §  
CRIMINAL JUSTICE. §

DEFENDANTS §

CIVIL ACTION NO.  
4:14-cv-3253  
JURY DEMAND

**PLAINTIFFS' CONSOLIDATED RESPONSE TO DEFENDANTS' MOTIONS  
TO STRIKE SUMMARY JUDGMENT EVIDENCE**

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Exhibit A

**IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

**Stephanie McCollum, et al.,**

**v.**

**Brad Livingston, et al.,  
Defendants.**

§  
§  
§  
§  
§  
§

**Civil Action No. 3:12-CV-02037**

**JURY DEMAND**

**DEFENDANT TEXAS DEPARTMENT OF CRIMINAL JUSTICE'S RESPONSES  
TO PLAINTIFFS' REQUESTS FOR PRODUCTION AND INTERROGATORIES**

**TO:** Jeff Edwards, The Edward Law Firm, The Bremond Houston House, 706 Guadalupe, Austin, Texas 78701; Scott Medlock, Brian McGiverin, James C. Harrington, Texas Civil Rights Project, 1405 Montopolis Drive, Austin, Texas 78741; and Eliot Shavin, 2600 State Street, Dallas, Texas 75204

COMES NOW the Defendant, Texas Department of Criminal Justice, by and through counsel, the Texas Attorney General's Office, and offers the following **Defendant Texas Department of Criminal Justice's Responses to Plaintiffs' Requests for Production and Interrogatories.**

Respectfully submitted,

**GREG ABBOTT**

Attorney General of Texas

**DANIEL T. HODGE**

First Assistant Attorney General

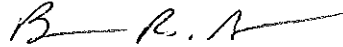
**DAVID C. MATTAX**

Deputy Attorney General for Defense Litigation

**KAREN D. MATLOCK**

Assistant Attorney General

Chief, Law Enforcement Defense Division



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**BRUCE R. GARCIA**  
Assistant Attorney General  
Attorney in Charge  
State Bar No. 07631060  
So. Dist. Bar No. 18934

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Austin, Texas 78711  
(512) 463-2080 / Fax (512) 495-9139

**ATTORNEYS FOR DEFENDANTS  
TEXAS DEPARTMENT OF CRIMINAL  
JUSTICE, BRAD LIVINGSTON AND JEFF  
PRINGLE**

**CERTIFICATE OF SERVICE**

I, **BRUCE R. GARCIA**, Assistant Attorney General of Texas, do hereby certify that a true and correct copy of the above and foregoing **Defendant Texas Department of Criminal Justice's Responses to Plaintiff's First Set of Requests for Production and Interrogatories** has been served by courier service on this the 21<sup>st</sup> day of December 2012 addressed to:

Jeff Edwards  
The Edwards Law Firm  
The Bremond Houston House  
706 Guadalupe  
Austin, Texas 78701

Scott Medlock  
Texas Civil Rights Project  
1405 Montopolis Drive  
Austin, Texas 78741

Eliot Shavin  
2600 State Street  
Dallas, Texas 75204



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**BRUCE R. GARCIA**  
Assistant Attorney General

**FIRST SET OF INTERROGATORIES**

1. Identify all steps you took to protect Larry McCollum from heat index temperatures in the Hutchins Unit in excess of 90 degrees.

**RESPONSE:** Each year in April the Agency has mandatory heat precaution training for all staff and offenders. Each shift supervisor was instructed to discuss heat awareness and warning signs at shift turn outs during the summer months. Heat awareness, warning signs, and hydration memos were placed throughout the facility for staff and offenders. Shower temperatures were lowered and showers times were extended. Water coolers with ice were placed in the dorms during summer months. Staff was instructed that offenders identified or requested relief from the heat were allowed to sit in cooler areas.

See also attached heat safety training and circulars produced with Request for Production 3-5.

2. Identify all heat-related injuries (including, but not limited to, fatalities, where the cause of death is listed as "hyperthermia") of inmates in Texas Department of Criminal Justice facilities between January 1, 1990 to the present.

**RESPONSE** Objection, overly broad and unduly burdensome, not limited in time or scope, Defendant further objects to the extent this seeks medical information privileged under HIPAA. Subject to and without waiving between fiscal year 2008 to present, there have been three offender heat-related injuries in the Hutchins State Jail. The first was in June of 2009, the second in July of 2011 to Larry Gene McCollum, and the third was in June of 2012.

3. Identify all heat-related injuries (refer to definition paragraph R) to inmates in Texas Department of Criminal Justice facilities between January 1, 1990 to the present.

**RESPONSE:** See response to TDCJ Interrogatory No. 2

3. Identify all heat-related injuries to inmates in the Hutchins Unit between January 1, 2002 to the present.

**RESPONSE:** See response to TDCj Interrogatory No. 2.

4. Identify all heat-related injuries to employees of the Texas Department of Criminal Justice working in Texas Department of Criminal Justice facilities between January 1, 2002 to the present, including, but not limited to, injuries where employees filed workers compensation claims.

**RESPONSE:** Objection, overly broad, unduly burdensome and not reasonably limited in time or scope. Defendants also object to the extent Plaintiff's interrogatory seeks medical information protected by HIPPA. Subject to and without waiving:

From fiscal year 2008 to present there have been seven employee heat-related injuries at the Hutchins State Jail. Three occurred in 2009, two in 2010 and two in 2012, five filed workers' compensation claims.

5. Identify all heat-related injuries to employees of the Texas Department of Criminal Justice in the Hutchins Unit between January 1, 2002 to the present, including, but not limited to, injuries where employees filed workers compensation claims.

**RESPONSE:** See TDCJ response to Interrogatory No. 4.

6. Describe in detail why all inmate housing areas at the Hutchins Unit are not air conditioned, identifying all people responsible for decisions not to air condition any part of the Hutchins Unit.

**RESPONSE:** Objection, overly broad, unduly burdensome and not calculated to lead to the discovery of relevant or admissible evidence. The Hutchins unit was constructed in the mid 1990's All decisions made regarding these issues were made in the 1990's, by former administrators.

7. Identify all persons who authorized Larry McCollum's placement in each housing area he spent time in during his 2011 incarceration at the Hutchins Unit and describe in detail the basis for each placement. A response to this interrogatory should identify each location Larry McCollum was housed, including building, bunk number, and whether he was assigned to an upper or lower bunk.

**RESPONSE:** Please see memo from P. Escobedo regarding housing and bunk assignments.

8. Identify all persons who you believe have knowledge of relevant facts and identify the issues upon which you believe they have knowledge. A response to this interrogatory should include, but is not limited to, all prisoners housed in the dorm with Larry McCollum on July 22, 2011 and July 23, 2011.

**RESPONSE:** Please see Defendant's initial disclosure. In addition, Defendants have ordered and will supplement with the Office of Inspector General Investigation. See attached dorm roster for July 21, 2011, Hutchins State Jail shift rosters for June and July 2011, and the reports produced in response to Request for Production 22.

9. If you contend that some other person or legal entity is, in whole or in part, liable to Plaintiff in this matter, identify that person or legal entity and describe in detail the basis of said liability.

**RESPONSE:** Unknown at this time, should another responsible party become apparent, Defendants will supplement.

10. Please describe in detail all steps that you have taken to bring the Hutchins Unit into compliance with the Americans with Disabilities Act and the Rehabilitation Act. Please include information about what modifications (if any) have been made at the prison, whether a transition plan and self-evaluation have been completed (as those terms are used in the ADA), and what services and programs at the jail exist to accommodate inmates' disabilities.

**RESPONSE:** Objection, overly broad, unduly burdensome, not limited in time or scope and not reasonably calculated to lead to the discovery or admissible evidence. In addition this interrogatory is vague and overbroad as to the term "inmate disabilities". Subject to and without waiving, please see TDCJ's response to Request for Production No.25.

11. Please identify each person who provided information or assisted in any way in answering these interrogatories, and as to each such person, please indicate the discovery request with respect to which he or she was involved.

**RESPONSE:** Warden Jeff Pringle, Interrogatory 1, 7, 8, 12, 14,

Robert Warren, Risk Management Division, Interrogatories 2-5, 15,  
Frank Inmon, Facilities Management, Interrogatory 13

12. Please identify all persons employed at the Hutchins Unit whose duties included spending time in the dormitories during the summer of 2011, including, but not limited to, sworn law enforcement officers and non-sworn employees.

**RESPONSE:** Objection, overly broad - all employees except administrative duties may require some time in the dormitories.

13. Please identify who was responsible for construction of the Hutchins Unit, including, but not limited to, the construction firm and any architects involved in the design of the Hutchins Unit. A response to this interrogatory should include information about the design of the ventilation system at the Hutchins Unit.

**RESPONSE:** Objection, overly broad, unduly burdensome, and vague and not calculated to lead to the discovery of admissible or relevant evidence. Subject to and without waiving:

Architects / Engineers:

Aguirre Associates Inc. - Designed the Ventilation

Latta Technical Services Inc.

Mulhauser McCleary Associates Inc.

HNTB Corporation

14. Please describe why inmates at the Hutchins Unit were not permitted to use personal fans in 2011.

**RESPONSE:** The dormitories do not have electrical outlets.

15. Please describe in detail "heat conditions" assigned to prisoners at the Hutchins Unit including, but not limited to, why prisoners are assigned these conditions and what action (if any) TDCJ takes when a prisoner is assigned "heat conditions."

**RESPONSE:** Objection, vague as to the term "heat conditions". See response to TDCJ request for Production No. 3.

16. Please describe in detail all TDCJ policies about what personal property prisoners at the Hutchins unit were allowed to possess in July 2011. A response to this interrogatory should include what items newly-arrived prisoners at the Hutchins Unit are issued on arrival, what items can be purchased from the prison commissary, and when newly-arrived prisoners can purchase items from the commissary.

RESPONSE: See attached policies, AD 03.72 (rev. 5), "Offender Property," dated September 1, 2002, Offender Orientation Handbook, dated November 2004).

17. Please identify all persons that Defendant expects to call to testify on Defendant's behalf at trial.

**RESPONSE:** Defendants have made no decisions at this time regarding trial testimony. Defendants will supplement per the Federal Rules of Civil Procedure and the scheduling order.

### **REQUESTS FOR PRODUCTION**

1. Please produce all documents or other physical or tangible evidence related to, referred to, identified in, or that formed the basis of any answer to the previous interrogatories, identifying the specific interrogatory to which that document or evidence is related.

**RESPONSE:** Objection, overly broad and unduly burdensome. Please see specific responses for specific document references.

2. Please produce all documents, including, but not limited to inmate grievances and correspondence from state officials, reviewed by Jeff Pringle or Brad Livingston prior to July 22, 2011 regarding heat and/or high temperatures in TDCJ facilities.



**RESPONSE:** Objection, overly broad and unduly burdensome, not reasonably limited in scope or time, and vague as to the term “state officials.” Subject to and without waiving please see grievances filed on the Hutchins Unit for July, 2010 to the present attached as TDCJ’s response to request for production No.2.

3. Please produce copies of all relevant policy documents governing procedures that were in place during 2011 at the Hutchins Unit related to heat, temperature, or heat index. The request includes any rules or policies governing acceptable temperatures in TDCJ inmate housing areas during the summer months or other periods of high temperatures.

**RESPONSE:** Objection, overly broad and unduly burdensome and this request may include documents protected by the attorney client privilege. Subject to and without waiving, see responses attached as TDCJ’s response to request for production No.3 and No.4.

4. Please produce all documents that describe, or are used in, or are otherwise related to the training of officers at the Hutchins Unit related to high temperatures at the prison prior to July 22, 2011.

**RESPONSE:** Objection, overly broad and unduly burdensome and this request may include documents protected by the attorney client privilege. Subject to and without waiving, see TDCJ’s response to request for production No.3 and No.4

5. Please produce all work orders for the repair of ice machines, fans, ventilation, sinks, and showers for inmate housing areas at the Hutchins Unit, including, but not limited to, AD84 forms, created from January 1, 2011 to the present.

**RESPONSE:** Objection, overly broad and unduly burdensome. Subject to and without waiving, see TDCJ’s response to Request for Production No.5.

6. Please produce all current documents that describe, or are used in, or are otherwise related to the training of officers at the Hutchins Unit related to high temperatures at the prison.

**RESPONSE:** Objection, repetitive, unduly burdensome. See TDCJ previous responses to Request for production No. 3 and No. 4.

7. Please produce all documents related to heat, high temperatures, or heat index related to any training Jeff Pringle or Brad Livingston received from TDCJ prior to July 22, 2011.

**RESPONSE:** Objection, repetitive, unduly burdensome. Subject to and without waiving, please see TDCJ responses to Request No. 3, No. 4, and No. 7.

8. Please produce all documents Brad Livingston or Jeff Pringle reviewed at any time prior to July 22, 2011 showing any medical treatment any person (including inmates and TDCJ employees) received related to heat-related injuries.

**RESPONSE:** Objection, overly broad and unduly burdensome not limited in time or scope. In addition security does not have access to offender medical records. That information is kept by the medical providers.

9. Please produce all documents, including any diagrams or pictures, related to the structure and function of any ventilation system (including, but not limited to, the air handlers, and fans) at the Hutchins Unit.

**RESPONSE:** Objection, overly broad and unduly burdensome and not limited in scope and calls for the creation of a document.

10. Please produce a diagram of the Hutchins Unit, identifying which portions (if any) of the facility are air conditioned, and any locations where Larry McCollum was housed prior to his death.

**RESPONSE:** Objection, calls for the creation of a document. Subject to and without waiving, no such document as requested exists.

11. Please produce a diagram of the dorm to which Larry McCollum was assigned on the date he died. The diagram must include notations of the length of all interior walls.

**RESPONSE:** Objection Plaintiff is asking for the creation of a document.

12. Please provide a detailed and complete list of all areas in the Hutchins Unit that are air conditioned.

**RESPONSE:** Objection calls for the creation of a document. Subject to and without waiving, no such list exists.

13. Please provide a detailed and complete list of all areas in the Hutchins Unit that are NOT air conditioned.

**RESPONSE:** Objection, calls for the creation of a document. Subject to and without waiving, no such list exists.

14. Please provide a detailed and complete list of all TDCJ facilities where some or all inmate housing areas are air conditioned. indicating which portions of each facility are air conditioned.

**RESPONSE:** Objection, calls for creation of a document. Subject to and without waiving, no such document as described or requested exists.

15. Please provide all medical and infirmary records related to Larry McCollum, while he was incarcerated by TDCJ.

**RESPONSE:** Defendants have ordered all medical information from the contract medical care providers and will supplement.

16. Please provide all grievances filed by prisoners at the Hutchins Unit related to heat, high temperature, or heat index from January 1, 2007 to the present.

**RESPONSE:** Objection overbroad and unduly burdensome, and repetitive. Subject to and without waiving, See TDCJ's response to request for production No. 2.

17. Please provide all grievances filed by prisoners in all TDCJ facilities related to heat, high temperature, or heat index from January 1, 2007 to the present.

**RESPONSE:** Objection, overly board and unduly burdensome, repetitive, not reasonably limited in time or scope, and not calculated to lead to the discovery of admissible

evidence. Subject to and without waiving, see TDCJ's response to plaintiffs request for production No.2.

18. Please produce all purchase orders for ice, ice machines, water, water bottles, water jugs, and fans from the Hutchins Unit from January 1, 2007 to the present.

**RESPONSE:** Objection, overly board and unduly burdensome, not reasonably limited in time or scope. Subject to and without waiving, defendant has ordered and will supplement if any documents are responsive.

19. Please produce all documents related to ventilation design at the Hutchins Unit, including any documents related to ventilation, air conditioning, air flow, and fan placement in inmate housing areas.

**RESPONSE:** Objection, overbroad and unduly burdensome, not reasonably limited in scope, and vague as to the terms "ventilation design", "air flow" and "fan placement". Subject to and without waiving defendants have ordered and if any documents are responsive, they will supplement.

20. Please produce all documents related to any decision to not air condition any portion of the Hutchins Unit.

**RESPONSE:** Objection, overbroad, not reasonably limited in scope or time. Subject to and without waiving, defendants have ordered and if any documents are responsive to this request, will supplement.

21. Please produce all documents related to any additional water or ice provided to inmates in any location Larry McCollum was housed at the Hutchins Unit during his confinement there.

**RESPONSE:** See TDCJ's response to request for production No.3.

22. Please produce all documents related to any investigation conducted into Larry McCollum's death, including, but not limited to, any autopsy, investigation by the TDCJ Office of the Inspector General investigation conducted by any other law enforcement body (including, but not limited to the Texas Department of Public Safety) and/or any investigation or peer review conducted by the University of Texas Medical Branch (or any other entity providing medical care to Larry McCollum).

**RESPONSE:** Defendant has ordered and will supplement. The OIG investigation is still open at this time. Defendant objects to the extent this request seeks documents not in the Texas Department of Criminal Justice's care custody and control such as a peer review from the UTMB or any other entity providing medical care.

23. Please produce all documents showing temperatures and heat indexes recorded at the Hutchins Unit from January 1, 2007 to the present.

**RESPONSE:** See TDCJ's response to request No.23.

24. Please produce all documents presented to the Texas Board of Criminal Justice related to heat, temperature, heat index, or air conditioning at any TDCJ facility from January 1, 1990 to the present.

**RESPONSE:** Objection, overly broad and unduly burdensome, repetitive and not reasonably calculated to lead to the discovery of admissible evidence. In addition, this request is not reasonably limited in scope or time.

25. Please produce all accreditation reports generated by any accrediting bodies since January 1, 2007 pertaining to the Hutchins Unit.

**RESPONSE:** See attached TDCJ's response to request for production No. 25.

26. Please produce and separately identify all records related to any disciplinary actions taken against TDCJ personnel since January 1, 2002 for failing to comply with TDCJ policies and/or procedures related to heat, temperature, and/or heat index at the Hutchins Unit.

**RESPONSE:** Objection, overly broad and unduly burdensome, not reasonably limited in scope or time. Subject to and without waiving, defendants are unaware of any disciplinary actions for failure of a staff member to comply with TDCJ policies regarding heat.

27. Please produce all audio or video recordings of Larry McCollum.

**RESPONSE:** No such recordings exist.

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

STEPHEN McCOLLUM, and SANDRA §  
McCOLLUM, individually, and STEPHANIE §  
KINGREY, individually and as independent §  
administrator of the Estate of LARRY GENE §  
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BRAD LIVINGSTON, JEFF PRINGLE, §  
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UNIVERSITY OF TEXAS MEDICAL §  
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CRIMINAL JUSTICE. §

DEFENDANTS §

CIVIL ACTION NO.  
4:14-cv-3253  
JURY DEMAND

**PLAINTIFFS' CONSOLIDATED RESPONSE TO DEFENDANTS' MOTIONS  
TO STRIKE SUMMARY JUDGMENT EVIDENCE**

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Exhibit B

**IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

Stephanie McCollum, <i>et al.</i> ,	§	
	§	
v.	§	Civil Action No. 3:12-CV-02037
	§	
Brad Livingston, <i>et al.</i> ,	§	
Defendants.	§	JURY DEMAND

**DEFENDANT TEXAS DEPARTMENT OF CRIMINAL JUSTICE'S RESPONSES TO  
PLAINTIFFS' REQUESTS FOR PRODUCTION AND INTERROGATORIES**

**TDCJ - RFP #3**





# TEXAS DEPARTMENT OF CRIMINAL JUSTICE

## Extreme Heat Precautions

OPERATIONAL PROCEDURE/HUTCHINS UNIT April 15, 2012

**SUBJECT:** EXTREME HEAT PRECAUTIONS

**AUTHORITY:** Administrative Directive 10.64, Health Services Policy B-15.5, ACA Standard #4318

**PURPOSE:** To establish procedures to be followed by the staff of the Hutchins Unit during extreme heat situations

**INTRODUCTION:** In an effort to reduce heat related injuries and illnesses the Hutchins Unit will follow the aforementioned procedures for the staff and offenders assigned to the Hutchins Unit. This Standard Operating Procedure will be in addition to and in accordance with A.D. 10.64 "Temperature Extremes in the Workplace" and Health Services policy B-15.5 "Heat Stress".

**PROCEDURES:**

I. Hutchins Unit Staff

1. All Staff members newly assigned to the Hutchins Unit will receive annual training for Heat Related illnesses as required by TDCJ.
2. The Unit Risk Management Coordinator will issue each employee who is newly assigned to the Hutchins Unit a "Recognition of Heat Illness card". The card will be carried on the employee's person while they are on duty. Staff members will read the card and familiarize themselves with the signs of Heat Exhaustion, Heat Collapse, and Heat Stroke.
3. Staff members assigned to outside duty positions (i.e. gates, outside recreation yards, utility officers, escort officers) will be rotated out of the heat at least every two (2) hours and allowed to work an inside position.
  - A. The time limits may be changed by the Unit Risk Management Coordinator or a security supervisor as deemed appropriate. Staff should monitor each other for signs of heat distress.
  - B. Staff are encouraged to wear agency approved hats for coverage when outside in the summer months.
4. Cool drinking water will be provided at regular intervals to the staff assigned to outside positions that cannot leave their immediate area.
  - A. All water coolers will be picked up, cleaned and inspected with a fresh supply of water and ice daily. Staff members will immediately contact their supervisor if the exchange is not conducted.
  - B. Officers will have a fresh supply of ice once each shift to place cold drinks only in. No food items of any kind will be placed in the coolers. Staff members will immediately contact their supervisor if the exchange is not conducted.
5. Frequent water breaks will be provided to staff members working Field Squads, Yard Squads, Community Service Squads and Maintenance Squads.
  - A. Staff members will immediately contact their supervisor if they experience symptoms of Heat related illness/injury or if they witness another staff member with these symptoms.
  - B. Upon notification by a staff member, supervisors are to take action as per A.D. 10-64 and B-15.5 in resolving heat related issues.

Hutchins State Jail 1500 E. Langdon Rd. Dallas, Texas 75241 (972)225-1304

TDCJ - RFP #3 - 1

II. Hutchins Unit Offenders

1. ~~Offenders working outside in extreme heat will be provided frequent water breaks~~

- A. Offenders will be allowed to take breaks in shaded areas when possible
  - B. Offenders with work restrictions of 20 (no temperature extremes) and 21 (no humidity extremes) shall be removed from rosters where these conditions exist.
2. Offenders will be allowed to wear commissary purchased gym shorts and commissary purchased T-shirts in the housing areas and on the recreation yards.
3. Offenders will have free and frequent access to the dorm showers while the dayrooms are open, dorm lights will remain on during daylight hours, unless there is an incident or emergency situation.
4. Air handlers are in operation to ensure good circulation of fresh air in the housing areas.
5. At the Warden's Discretion, the purge fans may be turned on to allow for more fresh air circulation.

Note: To turn purge fans on or off access the electrical room for the desired building and turning the switches on the desired purge fan to the manual position. Turn to the off position to turn off.

6. Offenders will be provided cool drinking water during meal times.

- A. Additional cool drinking water may be delivered to the housing areas during the day. The coolers will be placed inside the living areas and also will be picked up and cleaned with an inspection done by the officer on duty and the food service department. All coolers will be picked up and filled with a fresh supply of water on second shift daily.

- B. Water fountains are in place on the recreation yards for cool water during outside recreation periods.

III. Unit Transport Procedures during extreme heat

1. Certain types of offenders transported off the unit will depart during the cooler parts of the day when possible. These include but are not limited to:
- A. Offenders taking psychotropic medications
  - B. Offenders with health issues deemed by the Unit Medical Department to be too severe to travel with in extreme heat situations.

IV. Back gate Procedures

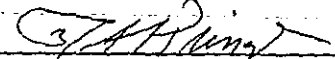
1. The Building Major shall be responsible for monitoring all Back gate waiting times for vehicles entering and exiting the unit.
2. Vehicles entering the unit will be immediately sent to their destination to be unloaded.
3. When a vehicle is not unloaded within fifteen (15) minutes a fan will be placed in the front entrance and if possible the rear of the vehicle to allow for fresh air circulation.
4. Towels will be made available to wet down for additional cooling.

V. Heat Advisories

1. Updates on extreme temperatures and heat conditions such as heat exhaustion, heat collapse, or heat stroke will be announced via radio on an hourly schedule.

Hutchins State Jail 1500 E. Langdon Rd. Dallas, Texas 75241

Senior Warden



TDCJ - RFP #3 - 2

\*\*\*\*\*  
 \*\*\* REQUESTOR: AK00002 - ANDERSON, KATIE PLANS AND OPERATIONS \*\*\*  
 \*\*\*\*\*  
 \*\*\* S Y S M O U T B A S K E T P R I N T \*\*\*

MESSAGE ID: 443924 DATE: 05/06/11 TIME: 12:34pm PRIORITY: 000

SUBJECT: HEAT PRECAUTION 2011

HEAT PRECAUTION 2011 - REMINDER

\*\*\*\*\*  
 IT IS THAT TIME OF YEAR AGAIN, WHEN EMPLOYEES WILL BE AFFECTED BY  
 EXTREME HEAT CONDITIONS. AS A REMINDER, DUE TO THE POTENTIAL FOR  
 EXTREME HEAT CONDITIONS IN THE COMING MONTHS, IT IS IMPERATIVE THAT  
 EVERYONE TAKE PRECAUTIONS TO HELP REDUCE HEAT-RELATED ILLNESSES.  
 ADMINISTRATIVE DIRECTIVE AD-10.64, "TEMPERATURE EXTREMES IN THE TDCJ  
 WORK PLACE," AND HEALTH SERVICES POLICY B15.2, "HEAT STRESS," SHOULD BE  
 REVIEWED BY JUNE 1, 2011, OR THE FIRST AVAILABLE DATE AN EMPLOYEE  
 RETURNS TO WORK, AND ENSURE TRAINING IS DOCUMENTED IN THE EMPLOYEES'  
 FILE. POCKET CARDS THAT INCLUDE TIPS FOR RECOGNITION, TREATMENT, AND  
 PREVENTION OF HEAT RELATED ILLNESSES ARE AVAILABLE FOR UNITS TO ORDER  
 FROM THE PRISON STORE. WARDENS SHALL ENSURE ALL EMPLOYEES ARE PROVIDED  
 WITH OR CURRENTLY HAVE POCKET CARDS (PRISON STORE  
 STOCK#700-01-060-527).

ON APRIL 25, 2011, STAFF FROM VARIOUS DEPARTMENTS SUCH AS, OFFENDER  
 TRANSPORTATION, HEALTH SERVICES, RISK MANAGEMENT, LAUNDRY AND FOOD  
 SERVICE, AND PLANS AND OPERATIONS MET TO REVIEW PRECAUTIONS AND  
 ACTIONS TAKEN LAST SUMMER AND TO DISCUSS ACTIONS FOR THE UPCOMING  
 SUMMER. BELOW IS A LIST OF PRECAUTIONS AND ACTIONS TO BE IMPLEMENTED  
 STARTING JUNE 1, 2011, AND ENDING OCTOBER 1, 2011. IF THE NEED ARISES,  
 IMPLEMENTATION MAY BEGIN PRIOR TO JUNE 1, 2011.

- ENSURE EMPLOYEES AND OFFENDERS ARE AWARE OF THE SIGNS AND TREATMENT  
 FOR HEAT RELATED ILLNESSES BY CONDUCTING TRAINING.
- PROVIDE ADDITIONAL WATER; ICE SHOULD BE PROVIDED, IF AVAILABLE TO  
 EMPLOYEES AND OFFENDERS IN WORK AND HOUSING AREAS, AND SHALL BE  
 COORDINATED WITH MAINTENANCE AND LAUNDRY AND FOOD SERVICE.
- RESTRICT OUTSIDE ACTIVITY (WORK HOURS) IN ACCORDANCE WITH AD-10.64,  
 "TEMPERATURE EXTREMES IN THE TDCJ WORK PLACE."
- ENSURE ALL STAFF AND OFFENDERS WORKING IN AREAS OF EXTREME HEAT  
 SUCH AS, FIELD, MAINTENANCE, AND YARD SQUADS ARE PROVIDED FREQUENT  
 WATER BREAKS.
- REFRAIN FROM TRANSPORTING PSYCHIATRIC INPATIENT OFFENDERS TO ANOTHER  
 FACILITY VIA CHAIN BUS.
- TRANSPORT OFFENDERS DURING THE COOLEST HOURS OF THE DAY.
- SCREEN OUTGOING CHAIN TO ENSURE THE SELECTED MODE OF TRANSPORTATION  
 IS APPROPRIATE.
- ALLOW OFFENDERS TO TAKE FANS WHEN BEING TRANSPORTED OFF THE UNIT FOR  
 A MEDICAL APPOINTMENT.
- UTILIZE INFO PAC REPORT (IMS042), IMF MEDICAL SCREEN, OR HSIN  
 SENSITIVE MEDICAL RESTRICTIONS (INCLUDING BUT NOT LIMITED TO AN  
 OFFENDER ON PSYCHOTROPIC MEDICATIONS) TO DETERMINE APPROPRIATE  
 TRANSPORTATION METHOD.
- LOAD AND UNLOAD TRANSFER VEHICLES AS QUICKLY AS POSSIBLE (SECURITY  
 IS THE FIRST PRIORITY AT EVERY BACKGATE, BUT WE MUST ALWAYS BE

TDCJ - RFP #3 - 3

AWARE OF HEAT RELATED ISSUES WHEN BUSES OCCUPIED BY OFFENDERS SIT FOR ANY LENGTH OF TIME (BUSES MAY CIRCLE THE PERIMETER IF THE UNIT FORESEES AN EXTENDED WAIT TIME). EVERY REASONABLE EFFORT SHALL BE

TDCJ - RFP #3 - 4

MADE TO ENSURE BUSES GET IN AND OUT OF THE BACKGATE IN A SAFE AND EXPEDIENT MATTER.

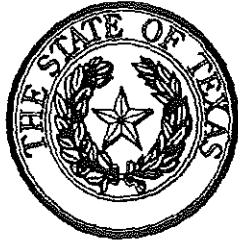
- TRANSFER VEHICLES PARKED FOR MORE THAN 15 MINUTES ARE REQUIRED TO PLACE A PREVIOUSLY PURCHASED FAN ON THE VEHICLE. UNITS SHALL ENSURE FANS, EXTENSION CORDS, ETC., ARE IN PLACE AND AVAILABLE WHEN NEEDED.
- STORE PAPER TOWELS FOR USE WHEN SATURATED WITH WATER DURING EMERGENCY SITUATIONS WHEN TRANSPORTING OFFENDERS.
- WATER COOLERS ON BUSES SHALL BE REFILLED AT VARIOUS TIMES DURING THE TRIP TO ENSURE WATER REMAINS AT THE APPROPRIATE TEMPERATURE (TRANSPORTATION).
- WHEN USING FANS, AIR SHOULD BE DRAWN THROUGH THE STRUCTURE AND EXHAUSTED OUTSIDE. TAKE FULL ADVANTAGE OF THE FRESH AIR EXCHANGE SYSTEM OR PREVAILING WINDS TO ASSIST IN THE MOVEMENT OF AIR AS APPLICABLE.
- INCREASE AIR FLOW BY USING BLOWERS, NORMALLY USED TO MOVE HOT AIR IN THE WINTER, WHEN APPROPRIATE. ATTACH RIBBONS TO VENTS TO ENSURE BLOWERS ARE USED APPROPRIATELY. ENSURE ALL NEEDED MAINTENANCE TO BLOWERS HAS BEEN COMPLETED.
- ALLOW ADDITIONAL SHOWERS FOR OFFENDERS WHEN FEASIBLE.
- ALLOW OFFENDERS TO WEAR SHORTS IN DAYROOMS AND RECREATIONAL AREAS.
- MAKE WATER AVAILABLE DURING MEAL TIMES.
- MAKE SURE WINDOW SCREENS ARE CLEAN SO AS NOT TO RESTRICT AIR FLOW.
- REMEMBER, OFFENDER FANS SHOULD NOT BE CONFISCATED DUE TO PROPERTY RESTRICTION DURING THIS TIME. FANS SHALL BE CONFISCATED ONLY IF THEY ARE ALTERED.
- FANS SHALL BE ALLOWED TO ALL CUSTODY LEVELS (TO INCLUDE ADMINISTRATIVE SEGREGATION AND DISCIPLINARY STATUS). OFFENDERS WITH FANS STORED BASED ON THESE RESTRICTIONS SHALL HAVE THEIR FANS RE-ISSUED FOR THE TIME PERIOD SPECIFIED IN THIS POSTING.
- ALL OFFENDERS SHALL BE PERMITTED TO PURCHASE A FAN IF THEY DO NOT HAVE ONE.
- ENSURE THE FAN PROGRAM IS IN PLACE ALLOWING THE PERMANENT ISSUE OF A FAN TO AN OFFENDER WHO HAS BEEN INDIGENT FOR THE PREVIOUS SIX MONTHS, ON A FIRST COME FIRST SERVE BASIS. OFFENDERS WHO HAVE SIGNIFICANT MEDICAL NEEDS, BASED ON A CONDITION OR MEDICATION THAT IS NEGATIVELY IMPACTED BY THE HEAT, SHALL BE GIVEN PRIORITY.
- WARDENS ARE ENCOURAGED TO COORDINATE WITH THEIR FOOD SERVICE AND MAINTENANCE DEPARTMENTS TO ENSURE ICE-MACHINES ARE WORKING PROPERLY.

IT IS REQUIRED THAT EACH DEPARTMENT POSTS THIS NOTICE IN COMMON AREAS ON THE FACILITY. YOUR ATTENTION TO THIS MATTER IS GREATLY APPRECIATED.

AUTHORITY: WILLIAM STEPHENS, DEPUTY DIRECTOR  
PRISON AND JAIL OPERATIONS

Sent to:	UNTS	<list>	(to)
	ADMN	<list>	(to)
	GCR9820	CRIPPEN, GEORGE RN, MSN, PHDC	(to)
	MBR2736	BRUMLEY, MARSHA	(to)

TDCJ - RFP #3 - 5



TEXAS DEPARTMENT  
OF  
CRIMINAL JUSTICE

NUMBER: AD-10.64 (rev. 6)

DATE: November 10, 2008

PAGE: 1 of 11

SUPERSEDES: AD-10.64 (rev. 5)  
September 19, 2006

## **ADMINISTRATIVE DIRECTIVE**

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SUBJECT: TEMPERATURE EXTREMES IN THE TDCJ WORKPLACE

AUTHORITY: Texas Government Code §493.006

Reference: American Correctional Association (ACA) Standards: 4-4153 and 4-4337

APPLICABILITY: Texas Department of Criminal Justice (TDCJ or Agency)

### **POLICY:**

The TDCJ shall establish guidelines to assist unit administration in adapting offender work assignments to temperatures in the work environment that cannot be controlled by the Agency. Guidelines for outside recreation are found in the TDCJ *Recreation Department Policy Manual*.

Every reasonable effort shall be made to prevent extreme temperature-related injuries in the workplace. Since the TDCJ has units throughout the State of Texas, the decision to expose offenders to extreme temperature (i.e., cold/heat) shall be made by the appropriate on-site staff.

TDCJ offenders are, at times, required to work in conditions of extreme cold or extreme heat. Frequently, situations may occur requiring specific work be completed regardless of the temperature or weather conditions.

### **PROCEDURES:**

Prior to exposing offenders to extreme temperature conditions (i.e., cold/heat), the Warden and involved Department Supervisors shall ensure appropriate measures are instituted which prevent extreme temperature-related injuries. The Warden and involved Department Supervisors are encouraged to consult medical staff to ascertain specific hazards. In all cases of temperature-related incidents or injuries, the unit medical staff and the unit Risk Manager shall be notified immediately. Upon arrival on the scene, medical staff shall take control of the individual's medical care. The injured offender shall be removed from the environment by the most expeditious means available to receive proper medical treatment.

TDCJ - RFP #3 - 6

- I. Procedures and exposure charts (Wind Chill Index [Attachment A] and Heat and Humidity Matrix [Attachment B]) are provided to assist unit officials in determining safe working conditions in extreme temperature conditions.
  - A. During work assignments, offenders shall be exposed to no more than three (3) or four (4) hours at a time, until acclimated to existing weather conditions. Work periods may then be extended as the offender physically adjusts to the weather conditions. Appropriate clothing shall be worn to protect the offender from extreme temperature conditions at all times.
  - B. Unit staff shall monitor the temperature once every hour between 6:30 a.m. and 6:30 p.m. The temperature shall be announced over the radio and documented on the Temperature Log (Attachment C). If conditions warrant, the Warden may also request additional readings.
  - C. Temperature Log
    1. The Warden shall designate a central location to maintain the Temperature Log.
    2. The Temperature Log shall indicate the wind chill or heat index.
    3. Temperature information is available through the following:
      - a. The National Oceanic and Atmospheric Administration (NOAA) website ([www.noaa.gov](http://www.noaa.gov));
      - b. NOAA Weather Radio;
      - c. Local weather radio and television stations; or
      - d. Onsite weather instrumentation (if available).
    4. Temperature Logs shall be maintained in accordance with the TDCJ *Records Retention Schedule*.
- II. Extreme Cold Conditions
  - A. Determination
    1. The Warden shall use the Wind Chill Index, the local news/weather media and/or weather conditions recorded by instruments located at the unit/picket in determining the safety of cold weather working conditions.



2. Clothing considered appropriate for offenders working in cold weather shall include: thermal underwear, insulated jackets, cotton or leather gloves, insulated hoods, work shoes and socks. The Wind Chill Index shall be used to determine the need for insulated hoods and leather gloves. Appropriate clothing shall be issued even when the index indicates little danger of exposure injury.
3. If guidance is needed, medical staff shall be contacted to determine appropriate clothing and footwear needed to prevent cold injury.
4. Care shall be taken to prevent perspiration which could soak clothing and thus compromise the clothing's insulating value.
5. Layers of clothing shall be removed or added according to the effective temperature and level of physical activity.

B. Symptoms

1. Hypothermia is a condition occurring when the body loses heat faster than the body can produce it. With the onset of this condition, blood vessels in the skin constrict (i.e., tighten) in an attempt to conserve vital internal body heat, thus affecting the hands and feet first.
2. If one's body continues to lose heat, involuntary shivers begin. This reaction is the body's way to produce more heat and is usually the first real warning sign of hypothermia.
3. Further heat loss produces speech difficulty, forgetfulness, loss of manual dexterity, collapse and finally death.

C. Types of Hypothermia

Hypothermics are divided into the following three (3) categories, depending on the degree of injury.

1. Category One

Injured individuals are conscious, but cold, with a rectal temperature above 90 degrees Fahrenheit (°F). These individuals shall be handled carefully, insulated and transported to medical care.

2. Category Two

Injured individuals are unconscious and with a rectal temperature of 90°F or below. These individuals shall be handled carefully and insulated from further heat loss. The individual shall be transported to the unit Medical Department for additional care.



## 3. Category Three

Injured individuals are comatose with no palpable pulse and no visible respiration. Although these individuals appear to be deceased, the injured individual may have a slight chance of recovery if the rectal temperature is 60.8°F or higher. If possible, medical staff shall proceed as follows:

- a. Apply positive pressure ventilation with oxygen.
- b. Judge the possibility of administering successful cardiopulmonary resuscitation (CPR). Consideration shall be given to the following prior to administering CPR:
  - (1) The difficulty in verifying that the heart has stopped without medical equipment;
  - (2) The compromise of rescuers to administer procedure during evacuation;
  - (3) The ability to continue CPR during rescue;
  - (4) The probability of chest compressions fibrillating or stopping a slow-beating, sensitive heart; and
  - (5) Continuing circulation by compressing a cold, stiff chest and heart muscle is unlikely.
- c. The injured individual shall be insulated and transported to a medical care facility.

## III. Extreme Heat Conditions

## A. Determination

- 1. Guidelines assisting the Warden in making the determination can be found in the Heat and Humidity Matrix. Weather conditions recorded by instruments on the unit/picket or reports by the local news media shall be used confirming specific temperature and humidity conditions. When the temperature is over 85°F, the Warden shall use the Heat and Humidity Matrix to determine the heat index. The heat index shall be used as an indicator of the risk for heat-related injury.
- 2. At any point when the Heat and Humidity Matrix indicates the possibility of heat exhaustion or heatstroke, the Warden shall instruct

the appropriate staff to immediately initiate the precautionary measures identified in the Heat and Humidity Matrix.

3. If guidance is needed, medical staff shall be contacted prior to exposing offenders to extremely hot working conditions to evaluate the hazards of the current temperatures and humidity, including indoor work areas (e.g., boiler room). The hazard of sunburn and other results of ultraviolet (UV) radiation shall also be closely monitored.
4. Offenders shall be provided and required to wear clothing appropriate for the effective temperatures and the hazards imposed by UV radiation (e.g., light-colored hats can be used to an advantage in high heat and direct sunlight).
5. Drinking water shall always be available to offenders in conditions of hot weather. According to individual medical advice, liquids containing sodium may be used depending on an offender's state of acclimatization to hot weather conditions.
6. Newly assigned offenders, who may not be acclimated to the heat, shall be medically evaluated prior to exposure to significant heat stress and closely monitored by supervisors for early evidence of heat intolerance.
7. High water intake, according to the Heat and Humidity Matrix, shall be enforced.
8. Offenders under treatment with diuretics or drugs inhibiting sweating require special medical evaluation prior to assignment to work in extreme heat.

B. Symptoms

1. Heat stroke symptoms include:
  - a. Diminished or absent perspiration (sweating);
  - b. Hot, dry and flushed skin; and
  - c. Increased body temperatures, which if uncontrolled may lead to delirium, convulsions and even death. Medical care is urgently needed.

2. Heat cramp symptoms include:
  - a. Painful, intermittent spasms of the voluntary muscles following hard physical work in a hot environment; and
  - b. Cramps usually occurring after heavy perspiring, and often beginning at the end of a work shift.
3. Heat exhaustion symptoms include:
  - a. Profuse perspiring, weakness, rapid pulse, dizziness and headaches;
  - b. Cool skin, sometimes pale and clammy, with perspiration;
  - c. Normal or subnormal body temperature; and
  - d. Nausea, vomiting and unconsciousness may occur.

#### IV. Emergency Treatment

- A. In all cases of temperature-related incidents or injuries:
  1. The first aid process shall be initiated immediately by security or other unit staff.
  2. Medical staff and the unit Risk Manager shall be notified immediately.
- B. In extreme cold conditions, staff shall:
  1. Bring the injured offender out of the cold and remove wet clothing;
  2. Wrap the injured offender in warm blankets or clothing;
  3. If frostbite exists, gently heat the affected area with warm water or warm towels. Do not rub the affected area; a heating pad or hot water bottles may also be used to treat the affected area;
  4. Continue the treatment upon arrival at the site or when the offender is delivered to medical staff's care;
  5. Apply the "ABC" of life support (open Airway, assist Breathing and restore Circulation), if necessary; and
  6. If cold injury is sustained, the following first aid procedures shall be administered immediately:

- a. Restrict the offender from further duties or activities until severity is evaluated;
- b. Remove all constricting items of clothing and footgear from injured areas;
- c. Remove wet clothing and insulate the offender with dry clothing and blankets, ensuring the injured area is covered;
- d. Do not rupture blisters;
- e. Encourage consumption of warm, sweetened liquids;
- f. If a lower extremity is affected, treat as a stretcher patient by slightly elevating the affected lower extremity;
- g. If evacuation from cold requires travel on foot, do not thaw the affected area until the offender reaches medical help; and
- h. Transport the offender to medical care as soon as possible.

C. In extreme heat conditions, staff shall:

- 1. Immediately begin an attempt to decrease the offender's temperature by placing the offender in a cool area;
- 2. Only force oral fluid intake if the offender is conscious and able to safely swallow;
- 3. Remove heavy clothing or excess layers of clothing; saturate remaining lightweight clothing with water. Position the offender in the shade with air movement past the offender. Fan the offender if necessary to create air movement;
- 4. If ice is available, place ice packs in armpit and groin areas;
- 5. Take all of these measures while moving the offender in the most expeditious means available to continue with and obtain proper medical treatment; and
- 6. Ensure, whenever medical staff are on-site, to continue treatment as directed by the physician or medical staff.

## V. Training

- A. Each Warden shall ensure training in the prevention of temperature extreme injury is provided by unit medical staff to all supervisors designated by the Warden. Cold Training shall be completed in September, and Heat Training shall be completed in May of each year.
1. Supervisors shall be responsible for training employees and work assigned offenders.
  2. Non-work assigned offenders shall be notified of heat awareness via the dayroom bulletin boards and/or other common use areas (i.e., *The Echo*, *Offender Orientation Handbook*).
- B. A copy of all training rosters shall be provided to the unit Risk Manager and Human Resources Representative (staff training). The unit Risk Manager shall forward a copy of the training roster to the respective Regional Risk Manager. The Regional Risk Manager shall forward the total number of employees and offenders trained to the Risk Management Central Office.
- C. A standardized training program shall be developed by the TDCJ Department of Preventive Medicine in conjunction with the University of Texas Medical Branch (UTMB) Department of Education and Professional Development.
1. The initial extreme temperature conditions training is provided in the Pre-Service Training sessions, and additional training shall be provided in annual In-Service Training sessions.
  2. The training is given in a group setting.
  3. All units are responsible for conducting an annual standardized training program utilizing unit-based medical staff.
  4. Requests for selected unit training shall be submitted to the Director for Preventive Medicine.

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Brad Livingston<sup>1</sup>  
Executive Director

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<sup>1</sup> Signature on file.

AD-10.64 (rev. 6)  
Attachment A  
Page 9 of 11

### WIND CHILL INDEX

Wind Speed in MPH	ACTUAL THERMOMETER READING (°F)									
	50	40	30	20	10	0	-10	-20	-30	-40
	EQUIVALENT TEMPERATURE (°F)									
CALM	50	40	30	20	10	0	-10	-20	-30	-40
5	48	37	27	16	6	-5	-15	-26	-36	-47
10	40	28	16	4	-9	-21	-33	-46	-58	-70
15	36	22	9	-5	-18	-36	-45	-58	-72	-85
20	32	18	4	-10	-25	-39	-53	-67	-82	-96
25	30	16	0	-15	-29	-44	-59	-74	-88	-104
30	28	13	-2	-18	-33	-48	-63	-79	-94	-109
35	27	11	-4	-20	-35	-49	-67	-82	-98	-113
40	26	10	-6	-21	-37	-53	-69	-85	-100	-116
Over 40 MPH (little added effect)	LITTLE DANGER (for properly clothed person)				INCREASING DANGER (Danger from freezing or exposed flesh)			GREAT DANGER		

The human body senses "cold" as a result of both the air temperature and wind velocity. Cooling of exposed flesh increases rapidly as the wind velocity increases. Frostbite can occur at relatively mild temperatures if wind penetrates the body insulation. For example, when the actual air temperature of the wind is 40°F and its velocity is 30 mph (48 km/h), the exposed skin would perceive this situation as an equivalent still air temperature of 13°F.

Clothing considered appropriate and currently available in the inventory is thermal underwear, insulated jackets, cotton and leather gloves, insulated hoods, work shoes and socks. Again, caution shall be taken when exposure occurs for longer periods of time.

**HEAT AND HUMIDITY MATRIX**

	AIR TEMPERATURE (°F)										
	70	75	80	85	90	95	100	105	110	115	120
Relative Humidity	Apparent Temperature										
0%	64	69	73	78	83	87	*91	*95	*99	*103	**107
10%	65	70	75	80	85	*90	*95	*100	**105	**111	**116
20%	66	72	77	82	87	*93	*99	**105	**112	**120	***130
30%	67	73	78	84	*90	*96	*104	**113	**123	***135	***148
40%	68	74	79	86	*93	*101	**110	**123	***137	***151	
50%	69	75	81	88	*96	**107	**120	***135	***150		
60%	70	76	82	*90	*100	**114	***132	***149			
70%	70	77	85	*93	**106	**124	***144				
80%	71	78	86	*97	**113	***136					
90%	71	79	88	*102	**122						
100%	72	80	*91	**108							

\* Heat exhaustion possible

\*\* Heatstroke possible

\*\*\* Heatstroke imminent

**Heat Exhaustion:** Staff shall ensure adequacy of water intake, look for signs of exhaustion. Five (5) minute rest breaks every hour.

**Heatstroke Possible:** Staff shall promote high water intake, five (5) minute rest breaks every one-half (1/2) hour; lay down, feet up. Reduce work by one-third (1/3).

**Heatstroke Imminent:** Secure outside work or reduce work pace by one-half (1/2) to two-thirds (2/3). Ten (10) minute break every one-half (1/2) hour; lay down, feet up. Insist on excessive water intake.

**Heat and Humidity:** At high temperatures, the human body normally cools itself through the evaporation of perspiration, but humidity interferes with this process. The above table, from the National Weather Service, shows how discomfort and health risks grow as heat and humidity increase. Remember: Apparent temperatures may run 15 to 30 degrees higher in urban areas with their vast expanses of concrete and asphalt.

AD-10.64 (rev. 6)  
Attachment C  
Page 11 of 11

**TEXAS DEPARTMENT OF CRIMINAL JUSTICE**  
**Temperature Log**

Unit: \_\_\_\_\_

Date:	Outside Air Temperature	Humidity or Wind Speed	Heat Index or Wind Chill	Person Recording
6:30 a.m.				
7:30 a.m.				
8:30 a.m.				
9:30 a.m.				
10:30 a.m.				
11:30 a.m.				
12:30 p.m.				
1:30 a.m.				
2:30 p.m.				
3:30 p.m.				
4:30 p.m.				
5:30 p.m.				
6:30 p.m.				



UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

STEPHEN McCOLLUM, and SANDRA §  
McCOLLUM, individually, and STEPHANIE §  
KINGREY, individually and as independent §  
administrator of the Estate of LARRY GENE §  
McCOLLUM, §

PLAINTIFFS §

v. §

BRAD LIVINGSTON, JEFF PRINGLE, §  
RICHARD CLARK, KAREN TATE, §  
SANDREA SANDERS, ROBERT EASON, the §  
UNIVERSITY OF TEXAS MEDICAL §  
BRANCH and the TEXAS DEPARTMENT OF §  
CRIMINAL JUSTICE. §

DEFENDANTS §

CIVIL ACTION NO.  
4:14-cv-3253  
JURY DEMAND

**PLAINTIFFS' CONSOLIDATED RESPONSE TO DEFENDANTS' MOTIONS  
TO STRIKE SUMMARY JUDGMENT EVIDENCE**

---

Exhibit C

**IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION**

**Stephanie McCollum, *et al.*,**

**v.**

**Brad Livingston, *et al.*,  
Defendants.**

§  
§  
§  
§  
§  
§

**Civil Action No. 3:12-CV-02037**

**JURY DEMAND**

**DEFENDANT TEXAS DEPARTMENT OF CRIMINAL JUSTICE'S RESPONSES TO  
PLAINTIFFS' REQUESTS FOR PRODUCTION AND INTERROGATORIES**

**TDCJ - RFP #4**

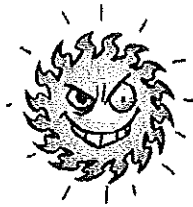


## TDCJ Risk Management's *Training Circular*

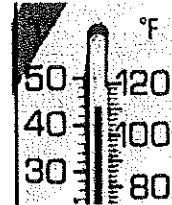
Volume 12 Issue 5

Risk Management Issues

May 2012



# May Hot Weather



Summer time in Texas is assuring adequate salt intake. From take. the dry desert heat of West Texas, to the muggy humid East Texas, one thing is for sure, it's **HOT!** Extreme heat in the workplace can pose serious health and safety issues.

Proper treatment of heat stress should begin at the worksite, but severe heat stress is a medical emergency which must be treated in a medical facility.

### HEAT STRESS FACTORS

For the human body to maintain a constant internal temperature, the body must rid itself of excess heat. This is achieved primarily through varying the rate and amount of blood circulation to the outer layers of the skin and releasing of fluid onto the skin by the sweat glands.



### EXTREME HEAT

Workers can suffer heat-related injuries, illnesses, and even death when the body's temperature control system is overloaded. Normally, the body cools itself by sweating, but under some conditions just sweating is not enough.

The evaporation of sweat cools the skin, releasing large quantities of heat from the body. As area temperatures approach normal skin temperature, cooling of the body

Every reasonable effort should be made in the interest of preventing heat related injuries in the workplace. Problems of heat stress are more common than those prevented by very cold environments.

Heat stress is best prevented by acclimatizing staff and offenders to working under hot and humid climate conditions, assuring adequate fluid intake and, to a lesser extent,

When a person's body temperature rises rapidly their vital organs are threatened. In a typical year about 175 Americans succumb to heat. Heat kills more people each year in the United States than tornadoes, floods, hurricanes, or lightning.



becomes more difficult.

If air temperature is as warm or warmer than the skin, blood brought to the body surface cannot lose its heat, and sweating becomes the primary means of maintaining a constant body temperature.

Sweating does not cool the body unless the moisture is removed from the skin by evaporation. Under conditions of high humidity, the evaporation of sweat from the skin is decreased and the body's efforts to maintain acceptable body temperature may be significantly impaired

### HEAT STRESS SAFETY HAZARDS

The frequency of accidents in general appears to be higher in hot environments than in more moderate temperatures. Heat tends to promote accidents that occur because of sweaty palms, dizziness, or the fogging of safety glasses. Employees can get burned from accidental contact with hot materials such as steam or metal surfaces.

Mental confusion, tiredness, and irritability may occur when an employee becomes overheated. The effect of these conditions can result in poor



judgment and unsafe practices.

### TYPES OF HEAT-RELATED ILLNESSES

**Heat Cramps:** usually develop following strenuous exercise, in muscles that have been subjected to extensive work. The pain is brief, intermittent and crampy, and may be quite severe. Heat cramps usually occur after several hours of work, and may occur even at low ambient temperatures. The cause is inadequate replacement of electrolytes (sodium and potassium).

**Treatment** consists of rest in a cool place and replacement of fluids and electrolytes, by drinking cool, caffeine-free fluids and eating a meal.



**Prevention** is accomplished by ample fluid intake during and after work, and salting of food during meals if not medically contraindicated. Use of electrolyte replacement drinks or lightly salted fruit drinks at the worksite may also be beneficial.

**Heat Exhaustion (Heat Prostration):** the most common form of heat stress, caused by depletion of water and salt. Symptoms include weakness, anxiety, fatigue, thirst, dizziness, headache, nausea and urge to defecate. Signs in-



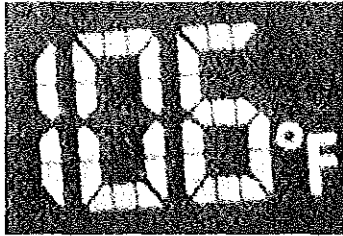
clude profuse perspiration, rapid pulse, in coordination and confusion.

Heat prostration may lead to **heat syncope**, a sudden onset of collapse that is usually of brief duration. During heat syncope the patient appears ashen gray and skin is cool and clammy. Failure to treat heat exhaustion may result in progression to heat stroke. Risk factors include failure to maintain adequate fluid intake during exertion, and taking diuretics.

**Treatment** is to remove the person to a cool area, having them lie down, remove shirt and shoes, begin oral rehydration. Some cases may require intravenous fluid replacement.

**Prevention** is accomplished by ample fluid intake during

work, proper work-rest cycles, and salting of food during meals if not medically contraindicated.



**Heat Stroke:** is a medical emergency. While it may be preceded by signs of heat exhaustion, the onset is often sudden. In heat stroke the body has lost its ability to dissipate heat and maintain a normal body temperature. Body temperature is often elevated over 106°F.

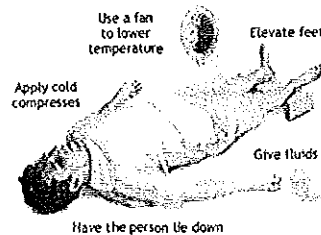
Exertional heat stroke occurs in young, healthy people who maintain inadequate fluid intake during exertion. Signs include headache, chills, gooseflesh, weakness, incoordination, nausea and vomiting, progressing to unconsciousness.

Classical heat stroke is seen in the elderly, those with predisposing medical conditions such as congestive heart failure, diabetes and alcoholism, and those on medications which cause fluid depletion, interfere with sweating or interfere with the body's thermoregulatory system.

Classical heat stroke has few premonitory signs. Collapse may be among the first symptoms. Skin is hot and dry, and pulse is rapid and weak. Shock and death may occur in either type of heat stroke.

**Treatment** is a medical emergency. The patient must be removed to a cool, air-conditioned place, stripped and cooled rapidly using a water spray and cooling fans.

**Prevention** includes ample fluid intake during work, proper work-rest cycles, excluding people at high risk from working under conditions of extreme heat and humidity, and maintaining adequate indoor conditions, such as access to cool fluids and use of



cooling fans, for persons at increased risk for heat stroke.

The key to all heat related illness is PREVENTION.

## HEAT RASH

**Heat Rash** - Heat rash is a skin irritation caused by excessive sweating during hot, humid weather. It can occur at any age but is most common in young children.

## Recognizing Heat Rash -

Heat rash looks like a red cluster of pimples or small blisters. It is more likely to occur on the neck and upper chest, in the groin, under the breasts, and in elbow creases.

**What to Do** - The best treatment for heat rash is to provide a cooler, less humid environment. Keep the affected area dry. Dusting powder may be used to increase comfort.

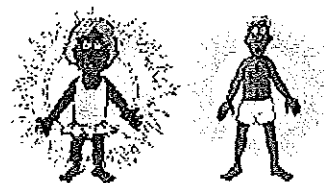
Treating heat rash is simple and usually does not require medical assistance. Other heat-related problems can be much more severe.

## SUN SAFETY

People who spend a lot of time outdoors run the risk of suffering from more than just heat exhaustion or heat stress.

Repeated exposure to ultraviolet (UV) radiation places them at risk for various forms of skin cancer and eye diseases, such as cataracts. The number of skin cancer cases in the United States continues to increase each year.

The sun's rays are most intense and damaging during



the summer months. The AD-10.64 is the Agency's pol- greatest exposure occurs from icy addressing temperature 10:00 a.m. until 4:00 p.m., but extremes in the TDCJ work- you can still get a sunburn place.



during cloudy weather, other seasons, and other times of the day.

The areas of the body most at risk to exposure to UV radiation are the back of the neck, ears, face, eyes, and arms.

These and other body parts can be easily protected by wearing proper clothing, sunglasses, and sunscreen. You can reduce your risk by taking precautions and avoiding repeated exposure to the sun.



### AD-10.64

Fortunately, the Agency recognizes the very real hazards associated with working within such temperature extremes and has taken proactive measures to protect staff.

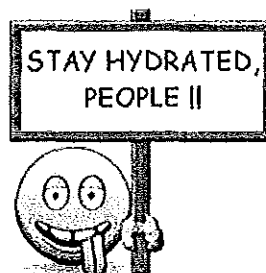
So much in fact, that this medical issue has an Administrative Directive devoted to it.

The last page of AD-10.64 contains the Heat and Humidity Matrix, as well as preventive steps to take when the apparent or 'feels like' temperature reaches varying levels of severity.

According to the matrix, which is adopted from the National Weather Service, a person can begin to feel the effects of heat exhaustion in temperatures as low as 80°.

Risks for heatstroke begin at temperatures of 91°. At 95°, there can be an imminent danger of developing heatstroke.

Bear in mind, these risk factors are accompanied by extremely high humidity levels.



### REFERENCES:

- TDI, DWC, Workplace Safety, HS99-151B
- CMHC, Heat Stress, B-15.2
- TDI, DWC, Heat-Related Injury & Illness Prevention Factsheet, HS04-047B

- TDI, DWC, Sun Safety, HS96-096E
- CDC, Emergency Preparedness & Response, Extreme Heat
- TDCJ, AD-10.64, Temperature Extremes in the TDCJ Workplace



Training Circular  
TDCJ Risk Management Department  
Volume 12 Issue 5  
May 2012

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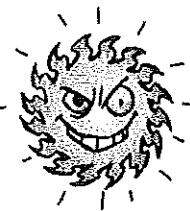


## TDCJ Risk Management's *Training Circular*

Volume 11 Issue 09

Risk Management Issues

September 2011



# Heat Wave



## Understanding Heat Related Illness

### A National Problem

Heat kills by taxing the human body beyond its abilities. In a normal year, about 175 Americans succumb to the demands of summer heat.

Among the large continental family of natural hazards, only the cold of winter - not lightning, hurricanes, tornadoes, floods, or earthquakes - takes a greater toll.

In the 40-year period from 1936 through 1975, nearly 20,000 people were killed in the United States by the effects of heat and solar radiation. In the disastrous heat wave of 1980, more than 1,250 people died.

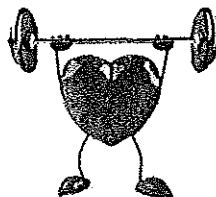
And those are the direct casualties. No one can know how many more deaths are advanced by heat wave weather - how many diseased or aging hearts surrender, which under better conditions would have continued functioning.

North American summers are hot; most summers see heat waves in one section or another of the United States.

East of the Rockies, they tend to combine both high temperatures and high humidity although some of the worst have been catastrophically dry.

### How Heat Affects the Body

Human bodies dissipate heat by varying the rate and depth of blood circulation, by losing water through the skin and sweat glands, and - as the last extremity is reached - by panting, when blood is heated above 98.6 degrees.



The heart begins to pump more blood, blood vessels dilate to accommodate the increased flow, and the bundles of tiny capillaries threading through the upper layers of skin are put into operation.

The body's blood is circulated closer to the skin's surface, and excess heat drains off into the cooler atmosphere. At the same time, water diffuses through the skin as perspiration. The skin handles about 90 percent of the body's heat dissipating function.

Sweating, by itself, does nothing to cool the body, unless the water is removed by evaporation - and high relative humidity retards evaporation.

The evaporation process itself works this way: the heat energy required to evaporate the sweat is extracted from the body, thereby cooling it.

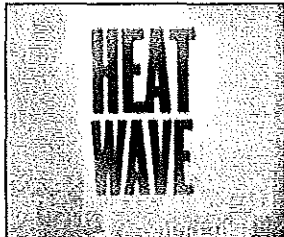
Under conditions of high temperature (above 90 degrees)

and high relative humidity, the body is doing everything it can to maintain 98.6 degrees internally.

The heart is pumping a torrent of blood through dilated circulatory vessels; the sweat glands are pouring liquid - including essential dissolved chemicals, like sodium and chloride - onto the surface of the skin.

### Heat Related Emergencies

Overexposure to the sun or heat can lead to cramps, exhaustion, and even death. Proper protection is essential for preventing sun and heat related illness. Prevention is simple, effective, and by far preferable to treatment.



Proper prevention measures significantly reduce probability of sun and heat related illness. Your actions in identifying and reacting to the signs of heat related illness could mean the difference between life and death.

### The Sun and Radiation

Over-exposure to the sun's ultraviolet rays can have detrimental effects on your skin. Here are some tips you may follow to reduce the risks of skin cancer:

- Avoid midday sun (10:00 am to 4:00 pm)
- Apply a waterproof sunscreen (SPF of 15 or greater)
- Wear tightly woven clothing to block sun
- Wear a broad brimmed hat to shadow face, neck and ears

Also keep in mind that:

- Sunlight reflected from snow and concrete increases the intensity of light on your skin
- Light cloud cover will not block or protect you from ultraviolet sunlight
- Water does not filter most ultraviolet light, thus being underwater (e.g. Snorkeling) will not protect you from the sun.

### Heat Related Illness

Overexposure to heat, humidity, or over exertion of the body can lead to heat related illness. This usually takes one of three forms:

### Heat Cramps

Heat cramps occur most com-

monly in the most worked muscles after heavy exercise in the heat. A high level of humidity, recent ingestion of alcohol, or being over the age of forty may increase the likelihood of heat cramps.



### Treatment for Heat Cramps

- Remove the patient from the hot environment.
- Take the patient into the shade or into a cool sheltered area.
- Have the patient sit or lie down to rest the cramping muscles.
- The patient should attempt to gently stretch the affected muscles.
- Encourage the patient to drink orange or tomato juice, a soft drink or a commercially available sodium balanced thirst quencher.
- Do not give liquids to a patient who is unconscious or not alert.
- Remove any sweat with a damp cloth.

If patient does not get better within 30 minutes, seek further medical attention. Dial 911 if necessary and ask for an ambulance. The paramedic dispatcher will give you further instructions.



Do not provide the patient with more water since this may further dilute the salt levels in the body. It is also not advisable to give the patient a salt-water mix or salt tablets since these may have other negative effects on the patient.

### Heat Exhaustion

Excessive loss of bodily fluids due to prolonged sweating, especially in a hot environment, can lead to heat exhaustion.

#### Symptoms of Heat Exhaustion

- Headache
- Fatigue
- Vomiting
- Nausea
- Thirst
- Giddiness
- Profuse sweating



The patient is usually cold and damp to the touch and skin may appear gray.

#### Treatment of Heat Exhaustion

- Remove the patient from the hot environment.
- Take the patient into the shade, or preferably, into a sheltered, air conditioned environment.



- Remove any extra clothing and loosen any clothing which is tight or restrictive.
- Urge the patient to lie down.
- If the patient is conscious and alert, provide suitable fluids such as tomato or orange juice, soft drinks or other commercially available sodium balanced thirst quenchers.

Further medical attention is highly recommended. Dial 911 and ask for the ambulance. The paramedic dispatcher will give you further instructions.

### Heat Stroke

Heat stroke occurs when the body is subjected to more heat than the body can possibly handle. Heat stroke is a serious medical condition and may lead to death without immediate emergency medical attention.

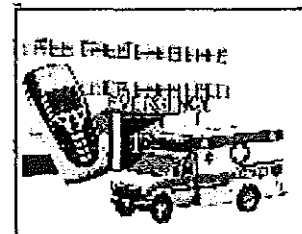
In heat stroke, body temperature rises too quickly resulting in the death of body tissue.

#### Symptoms of Heat Stroke

- Chills
- Nausea
- Vomiting
- Throbbing in the head
- Disorientation
- Slowing down of sweating

#### Treatment of Heat Stroke

The patient's life depends on rapid emergency medical care. Dial 911 and ask for an ambulance. The paramedic dispatcher will give you further instructions.



The patient's body must be cooled as rapidly as possible. Remove the patient from the hot environment and remove any excessive clothing while waiting for the ambulance.

#### Heat Illness Prevention Slow down

Strenuous activities should be

reduced, eliminated, or rescheduled to the coolest time of the day. Individuals at risk should stay in the coolest available place, not necessarily indoors.

### Dress for summer

Lightweight, light-colored clothing reflects heat and sunlight, and helps your body maintain normal temperatures.

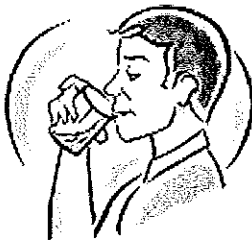


[PROTEIN]

### Put less fuel on your inner fires

Foods (like proteins) that increase metabolic heat production also increase water loss.

### Drink plenty of water or other non-alcoholic fluids



Your body needs water to keep cool. Drink plenty of fluids even if you don't feel thirsty. Persons who (1) have epilepsy or heart, kidney, or liver disease, (2) are on fluid

restrictive diets, or (3) have a problem with fluid retention should consult a physician before increasing their consumption of fluids.

### Do not drink alcoholic beverages

### Do not take salt tablets unless specified by a physician

Persons on salt restrictive diets should consult a physician before increasing their salt intake.

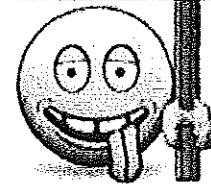
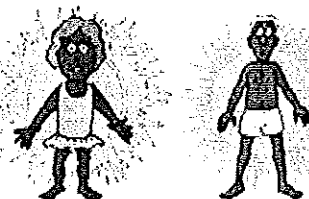
### Spend more time in air-conditioned places

Air conditioning in homes and other buildings markedly reduces danger from the heat.

If you cannot afford an air conditioner, spending some time each day (during hot weather) in an air-conditioned environment affords some protection.

### Don't get too much sun

Sunburn makes the job of heat dissipation that much more difficult.



Training Circular  
TDCJ Risk Management Department  
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## TDCJ Risk Management's *Training Circular*

Volume 11 Issue 04

Risk Management Issues

April 2011



# TEXAS SULTRY SUMMERS



**Summer** is just around the corner. Summer time is perfect to go swimming, watching the kids play baseball, football, BBQ's, or just sitting in the shade trying to stay cool while drinking some ice cold lemonade. The truth is we would rather be sitting in the cool air conditioning. But we can't put our lives on hold until it gets cooler. The grass is still going to grow. Cars are still going to need to be washed, and the kids still want to play outside. For these first timers in the Texas summer heat and humidity, you will now know the meaning of a Texas Summer before long. Since we have to go on with our daily activities, we can take precautions to reduce the risk of a heat related illnesses.



Have you ever heard someone say "An ounce of prevention is worth a pound of cure"?

That statement is very true when dealing with a heat related The best prevention for mosquito bites and not contacting the West Nile Virus is to follow

prevention protocols. Empty standing water in old tires, buckets, plant containers barrels, and/or any other container that collects water. Wear insect repellent between dusk and dawn when outdoors. Wear long sleeved light colored clothing and pants.

### WEST NILE VIRUS

The West Nile Virus (WNV) was first detected in the Western Hemisphere in 1999 and has since rapidly spread across the North American continent into all 48 continental states, seven Canadian provinces, and throughout Mexico. In addition, West Nile Virus activity has been detected in Puerto Rico, the Dominican Republic, Jamaica, Guadeloupe and El Salvador.

According to the U.S. Centers for Disease Control and Prevention (CDC), over 15,000 people in the U.S. have tested positive for the West Nile Virus infection since 1999, including over 500 deaths. Many more people have likely been infected with the West Nile Virus, but have experienced mild or no symp-

toms. Statistically, a person's risk of contracting West Nile is low, and less than 1% of those infected develop serious illness from the virus. Those at highest risk for serious illness are the elderly and those with lowered immune systems. However, people of all ages can develop serious illness, so it is important for everyone to protect themselves from mosquito bites to minimize the risk of infection.

However when symptoms do occur, they range from mild illness characterized by fever, headaches, sore muscles, rash and swollen lymph glands, including meningitis or encephalitis.

Very rarely, the illness results in death. Incubation period is 3-6 days after being bitten by an infected mosquito. If an unusual bird "die off" is noted, Contact the Risk Management Central Office (936) 437-4804 immediately for further instructions.



### FIRE ANTS

These pesky little critters can turn a nice picnic into a battle of

the marching ants. Who is going to get to the basket of food first? Fire ants bite down into the skin, then sting downwardly as they pivot; the result is a characteristic circular pattern of bites. Fire ants bites produce extremely painful vesicles that are filled with fluid. The bite causes a sharp, stinging pain followed by swelling. If a reaction occurs transport the victim to a physician.



### SCORPION

This insect just looks scary. They look like something out of a sci-fi movie that makes you want to run. Of the three species of scorpions in the United States that sting and inject poisonous venom, only one is generally fatal. The severity of the sting depends on the amount of venom injected; Ninety percent of all scorpion stings occur on the hands.

Signs and symptoms of scorpion stings include: sharp pain at the sting site, swelling at the sting site, which spreads gradually, discoloration at the sting site, nausea and vomiting, restlessness, drooling, poor coordination, incontinence and seizures.



### TICKS

Spring time always brings the best out in us. A nice game of fetch with the dog or a walk in the woods. But it also brings out the ticks. These little insects may be small but they can still be scary. If you spend time outdoors or have pets that go outdoors, you

need to beware of ticks. Ticks are small bloodsucking bugs. Many species transmit diseases to animals and humans. Some of the diseases you can get from a tick bite are; Lyme Disease, Ehrlichiosis, Rocky Mountain Spotted Fever and Tularemia. Some ticks are so small that they can be difficult to see. Ticks may get on you if you walk through areas where they live, such as tall grass, leaf litter or shrubs.

To remove a tick, follow the guidelines; remove a tick as soon as you discover it. The longer the ticks remains attached to the skin, the more likely for an infection to result. Use tweezers when removing a tick or cover your fingers with a tissue, grasp it as close as possible to the skin, pull firmly and steadily until the tick is dislodged and then flush it down the toilet, wash your hands with soap and water.



### WASPS

The most likely insect to cause sting reactions in the Southeast and Southwest, wasps tend to nest in small numbers under the eaves of houses and buildings. They like picnic areas, garbage cans, and food stands. Did you know that a wasp can deliver multiple stings at one time?.



### YELLOW JACKET

A principal insect causing sting reactions in the Northeast and Midwest, yellow jackets tend to dominate in late summer and fall. Nests are located in the ground. Often seen in picnic areas, Yellow jackets (*Vespula* species, *Ve-*

*spa* species and *Dolichovespula* species) are considered beneficial around home gardens and commercially grown fruits and vegetables at certain times of the year because they feed abundantly on insect pests such as caterpillars and harmful flies. Unfortunately, in late summer and early fall when their populations peak, the yellow jackets' normal insect diet disappears and their feeding habits become a problem to man. At this time of year, the yellow jacket has an appetite for much the same food and drink as those consumed by man. Also, yellow jacket stings can result in a life-threatening situation, especially if the person is allergic to yellow jacket venom.



### HONEYBEES

Found throughout the United States at any-time of the year, except in colder temperatures when they remain in their hives, in Northeast and Midwest honeybees are major insects causing sting reactions. Hives are usually found in hollowed out areas such as dead tree trunks. Honeybees principally ingest nectar of plants, so they are often seen in the vicinity of flowers. The honeybee with its barbed stinger will self-eviscerate after a sting, leaving the venom sac and stinger in place. Here are some interesting facts about honeybees.



- \* Bees have 5 eyes
- \* Bees fly about 20 mph
- \* Bees are insects, so they have 6 legs

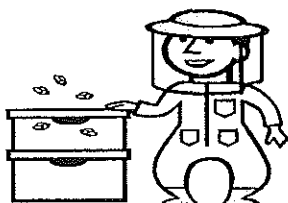
- \* Male bees in the hive are called drones
- \* Female bees in the hive (except the queen) are called worker bees
- \* Bees have been around 30 million years
- \* Bees carry pollen on their hind legs called a pollen basket or corbicula
- \* An average bee hive can hold around 50,000 bees.
- \* Bees have 2 pairs of wings
- \* Bees are important because they pollinate approximately 130 agricultural crops in the U.S. including fruit, fiber, nut, and vegetable crops.



### AFRICANIZED BEES

#### Bee Alert.

Africanized honey bees are well established in the wild population of honey bees in Texas. The Africanized bee is a hybrid (mixture) of African and European honey bee subspecies. Both are not native to the Americas. As a hybrid the Africanized bee appears identical to European honey bees. Individual foraging European and Africanized bees are highly unlikely to sting. A swarm rarely stings people when in flight or temporarily at rest. However, established Africanized colonies are more highly defensive toward perceived predators than European colonies. As



November 2004, 158 Texas counties have been quarantined for Africanized honey bees. Winkler County was added to the Texas AHB quarantine list on November 9, 2004.

The quarantine allows beekeepers to move bee hives within but not out of the zone in an effort to prevent the assisted spread of Africanized honey bees.

### SIMILARITIES

- \* Look the same
- \* Protect their nests from predators by stinging
- \* An individual bee can sting only once and then dies
- \* Have the same kind of venom
- \* Pollinate flowers, produce honey and wax

### AFRICANIZED BEES CAN

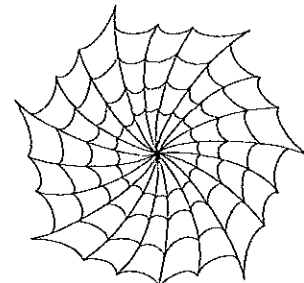
- \* Respond quickly to disturbances by people and animals 50 feet or more from the nest.
- \* Sense vibrations from power equipment 100 feet or more from the nest
- \* Sting in large numbers
- \* Will chase an enemy up to a ¼ mile or more.
- \* Have a higher rate of reproduction (swarm more frequently).
- \* Nest in smaller cavities and sometimes underground (e.g. water meters and animal burrows) shelter.



### SPIDERS

Texas has two venomous species of spiders, the black widow (*Latrodectus mactans*) and the brown recluse (*Loxosceles reclusa*). Both of these species of spiders can be found indoors and outdoors through out the State. The female black widow can be identified by its jet black color, globular abdomen with a reddish or yellowish hourglass on the underside. Male, black widow spiders are smaller, brown and nondescript. The black widow spider is aptly named because the female usually eats the male after mating. The venom of the black widow is a neurotoxin and can lead to severe systemic reactions and in rare cases, death. The black widow's venom is reportedly 15 times more toxic than the venom of the prairie rattlesnake. However, only a minute quantity is injected with each bite. The most severe reactions occur in children and older adults. Black widow spiders Black widow spiders can frequently be found in woodpiles, boxes, outdoor toilets, meter boxes, under eaves, and other undisturbed areas.

Brown recluse spiders are golden brown in color and can be identified by the characteristic





**SNAKES**

Say the word and for a lot of people, shivers go up and down their spine. Are they sneaky, slimy, scary or skillful and simply sensational? People either love them or hate them but either way snakes play a important role in our world. When working outdoors this spring in the garden or working offenders in the field force be aware of your surrounding.



the Leon River.

**Coral Snake** - poisonous  
Point out the small head and the red, yellow (white in this preserved specimen) and black bands. This snake is found in the wooded canyons and river bottom and may reach a length of 3 feet. It eats lizards, snakes and small mammals. It is found in central Texas eastward and is found at Miller Springs.

**Copperhead** - poisonous  
Point out the large head which in a live specimen would be the color of a penny, the hour glass shape of the bands on the back and the colors on the belly. These snakes are found in wooded areas in Texas and are found in the wooded areas of Miller Springs. Copperheads eat small mammals. They may reach a length of 4 feet.

**What to do if .....****Insect Bites**

Although most stings or bites do not require medical care, remember some stings or bites can be serious or even fatal. If you have the slightest suspicion that someone is having a generalized or allergic reaction, seek Emergency Treatment Immediately. If you are stung or bitten at the unit or office, notify your supervisor immediately.

**Snake Bites**

Wash the bite with soap and water. Immobilize the bitten area and keep it lower than the heart. Seek medical attention immediately. If bitten, notify your supervisor immediately.



**TEAM=Together Everyone Achieves More**

Unknown

**Texas Poisonous Snakes****Western Diamondback**

**Rattlesnake** - poisonous  
Point out the large head with small scales, the diamond pattern on its back; the black and white rings on the tail and the rattles. This snake is found in central Texas, including Miller Springs. This type of rattlesnake has been known to reach a length of 8.5 feet and eats mice, rats and rabbits.

**Cottonmouth** - poisonous

Point out the large head with small scales, the black color with hints of bands and the belly which has several colors but no pattern. This is a water snake that may get 6 feet long and eats frogs, fish, and small mammals in or near water. The Cottonmouth is found from central Texas eastward and is found in Miller springs along

Training Circular  
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Volume 11 Number 04  
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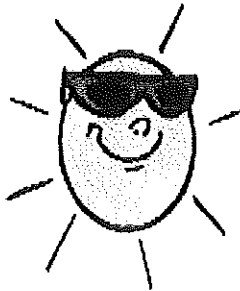


## TDCJ Risk Management's Training Circular

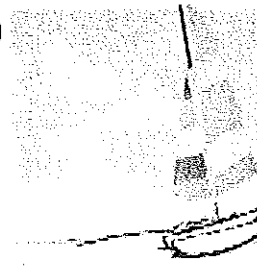
Volume 10 Issue 05

Risk Management Issues

May 2010



# MAY Chill Out



Oh, No, Summer is here again!!!! Hot days, hot nights, humidity, sweating, flat hair, feeling like you could melt any given moment, 3-digit temperatures, hunting for a shady area to sit and drink ice **COLD** lemonade and chill out, and oh, by the way, did I say it was **HOT!** As we say, **Welcome to a Texas Summer.**



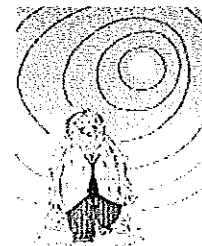
Did you know that it is a lot easier to prevent a heat related illness, than to treat a heat related illness?

During prolonged heat waves, the risk of heat related illnesses, injuries and deaths climb dramatically.



The Agency has Administrative Directive AD-10.64 that addresses the temperature extremes in the workplace. The Agency takes measures to protect staff and offenders within the agency from heat related illnesses. This directive contains information on the preventive measures to take as well as a Heat and Humidity Matrix chart. The TDCJ Department of Preventive Medicine in conjunction with UTMB will conduct employee/offender annual heat awareness training.

As summer months approach, the occurrence of heat related illnesses rise. **Recognition and prompt treatment of these symptoms are imperative.** Victims of prolonged or high heat can develop heat cramps or heat exhaustion. If heating continues, the condition can progress to a heat stroke and death.



Would you be able to recognize a heat related illness? Would you know how to treat the individual? Sit back, chill out and drink that cold glass of lemonade while we go through the recognition and treatment of heat related illness.



The Agency understands that the temperature levels affect the unit staff and offenders who are working in areas of high temperature and humidity levels. Due to the heat, temperatures sometimes run as high as the humidity levels.

### Would you know the symptoms?

**Heat Cramps**-are the most benign heat syndrome. They develop usually following strenuous exercise in muscles that have been subjected to extensive work. The pain is brief, intermittent and crampy but may be excruciating.



**Treatment**-consists of rest in a cool environment and replacement of fluids.

**Heat Exhaustion**-is the most common heat syndrome. The warning signs of heat exhaustion can be mild or severe, but all important danger signals. Symptoms include weakness, anxiety, fatigue, thirst, dizziness, headache, paleness, muscle cramps, nausea or vomiting and faintness. The onset is usually sudden and duration of brief collapse.



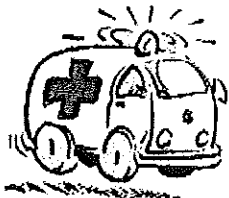
**Treatment**-consists of moving the patient to a cool area and having them lie down and elevate the feet. Spontaneous



recovery then usually starts taking place. If the patient is fully alert encourage small sips of water.

**Heat Stroke**-is a true medical emergency. Heat exhaustion can progress to a heat stroke. A sudden change in the level of consciousness in a setting of heat exposure suggests the possibility of a heat stroke. Heat strokes occur when the body's cooling system fails. The skin is hot and dry, pulse rate, respirations are rapid and weak. Coma, paralysis and death can follow if emergency treatment is not immediately given.

**Treatment**-once a heat stroke is suspected rapid, aggressive therapy aimed at lowering the body temperature should be initiated immediately by whatever means available. In field, remove the patient from the external sources of heat, remove clothing, and promote evaporative cooling by applying cool or iced water to the entire skin by surface sponging or splashing, accompanied by fanning either by hand or mechanical



means. This should be continued throughout transportation to an emergency room receiving facility as well. Always transfer heat stroke victims to a medical facility.

### Do you know how to avoid a heat illness during excessive heat?

As record-breaking high temperatures are here to stay for a few months throughout Texas, the Texas Department of Health (TDH) has issued a list of precautions people can take to reduce the risk of heat exhaustion and heat stroke. All Texans are urged to follow these precautions.

- \* Drink two to five times more water and non-sugar, non-alcoholic beverages to replace fluids lost in perspiration.
- \* Wear loose-fitting, lightweight, light-colored clothing and wide brimmed hats while in the sun.
- \* Use sunscreen with an SPF-15 or more.
- \* Take frequent breaks limiting physical activity.
- \* Rest in a cool place.





- \* Stay in an air conditioned area if possible. If no air conditioning is available, fans are helpful.
- \* Use the buddy system between co-workers in high heat jobs.
- \* Older people should have a friend or relative check on them or call twice a day.
- \* When planning activities choose cooler hours to be outdoors.
- \* Before prolonged work or exercise outdoors, listen to weather forecasts and give special attention to Advisories



### Heat Advisory

The national weather service issues alerts for excessive heat on a county-by-county basis. The alerts are broadcast on NOAA Weather radio and on local radio and television stations. The parameters of an excessive heat watch, warning, and advisory vary by location.

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### Your Pet



Animals are also susceptible to heat stroke, or hyperthermia, which is considered an emergency as it is with people. Signs in animals include excessive panting, increased body temperature, heart rate, or respiratory rate, unusual salivation, collapse, stupor, seizures, or coma, redder than normal gums.

Follow these common sense tips to prevent a heat-related pet emergency

- Besides the obvious... provide shelter and shade, fresh water, and good grooming, here are some tips to help keep your pet cool in the summer heat.
- Be aware of ways that your pet could accidentally be caught without shade - is your pet on a tether and could potentially get caught out in the full sun? Will the shade be available all day? While the shelter provides shade, is it hotter inside the shelter? If possible, utilize shade from trees in addition to the dog house; assuring that there is sufficient shade all day long.



### Final Reminder

Heat related illnesses can strike anyone in any occupation. The occupations from which heat related injuries are reported to Risk Management range from field security staff working outdoors in the sun to administrative staff working indoors at a cubicle. So, remember, drink plenty of liquids to keep your body hydrated and *stay cool!*



- If your pet is left indoors, is air conditioning available? Will the house stay cool through the heat of the day?
- For indoor or outdoor animals, a cool water "bath" before leaving for work will provide additional cooling for your pet.
- Is fresh, cool water available at all times? Can your pet spill the water source? Consider installing an automatic pet waterier.
- **Do not** plan long walks or go jogging in the heat of the day. This can be life-threatening for some dogs. Plan exercise and outdoor activities in the relative coolness of morning and evening time. Be sure to bring along fresh water or a collapsible drinking bowl to allow your pet to get a cool drink when needed.
- **NEVER** leave your pet in the car, even if it is only for a "quick errand"! This is very dangerous, even on days that are only mildly warm



### Sunburn

Sunburn should be avoided because it damages the skin. Although the discomfort is usually minor and healing often occurs in about a week, a more severe sunburn may require medical attention.

### Recognizing Sunburn

Symptoms of sunburn are well known: the skin becomes red, painful, and abnormally warm after sun exposure.

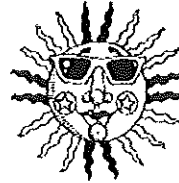
### What to Do

Consult a doctor if the sunburn affects an infant younger than 1 year of age or if these symptoms are present:

- Fever
- Fluid-filled blisters
- Severe pain
- Also, remember these tips when treating sunburn:
- Avoid repeated sun exposure.
- Apply cold compresses or immerse the sunburned area in cool water.
- Apply moisturizing lotion to affected areas. Do not use salve, butter, or ointment.
- Do not break blisters.



Have a very safe and enjoyable summer from the Risk Management Central Office.



Training Circular  
TDCJ Risk Management Department  
Volume 10 Issue 05  
May 2010

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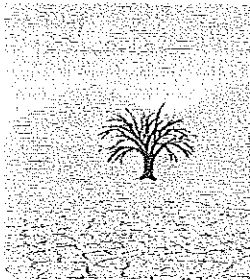


## TDCJ Risk Management's Training Circular

Volume 9 Issue 05

Risk Management Issues

May 2009



# MAY "COOL IT"



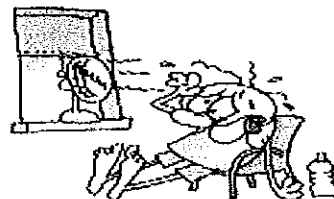
**Another Texas summer is here!** We can look forward to heat, humidity and more heat and humidity, flat hair, and sweating at 6:00 in the morning. This is what we call a Texas Summer. Since we can't put our life on hold and we have to continue with our daily responsibilities and activities in the heat, we can learn heat precautions to help reduce the risk of any heat related illness.



Did you know that it is a lot easier to prevent a heat related illness, than to treat a heat related illness? During prolonged heat waves, the risk of heat related illnesses, injuries and deaths climb dramatically.



The Agency understands that the temperature levels affect the unit staff and offenders who are working in areas of high temperature and humidity levels. Due to the heat, tempers sometimes run as high as the humidity levels. Just face the fact, it is **HOT!**



The Agency has Administrative Directive AD-10.64 that addresses the temperature extremes in the workplace. The Agency takes measures to protect staff and offenders within the agency from heat related illnesses. This directive contains information on the preventive measures to take as well as a Heat and Humidity Matrix chart. The TDCJ Department of Preventive Medicine in conjunction with UTMB will conduct

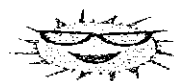
employee annual heat awareness training.

As summer months approach, the occurrence of heat related illnesses rise. *Recognition and prompt treatment of these symptoms are imperative.* Victims of prolonged or high heat can develop heat cramps or heat exhaustion. If heating continues, the condition can progress to a heat stroke and death.

### What are the Symptoms

**Heat Cramps**-are the most benign heat syndrome. They develop usually following strenuous exercise in muscles that have been subjected to extensive work. The pain is brief, intermittent and crampy but may be excruciating.

**Treatment**-consists of rest in a cool environment and replacement of fluids.



**Heat Exhaustion**-is the most common heat syndrome. The warning signs of heat exhaustion can be mild or severe, but all important danger signals. Symptoms include weakness, anxiety, fatigue, thirst, dizziness, headache, paleness, muscle cramps, nausea or vomiting and faintness. The onset is usually sudden and duration of brief collapse.



**Treatment**-consists of moving the patient to a cool area and having them lie down and elevate the feet. Spontaneous recovery then usually starts taking place. If the patient is fully alert encourage small sips of water.



**Heat Stroke**-is a true medical emergency. Heat exhaustion can progress to a heat stroke. A sudden change in the level of consciousness in a setting of heat exposure suggests the possibility of a heat stroke. Heat strokes occur when the body's cooling system fails. The skin is hot and dry, pulse rate, respirations are rapid and weak. Coma, paralysis and death can follow if emergency treatment is not immediately given.

**Treatment**-once a heat stroke is suspected rapid, aggressive therapy aimed at lowering the body temperature should be initiated immediately by whatever means available. In field, remove the patient from the external sources of heat, remove clothing, and promote evaporative cooling by applying cool or iced water to the entire skin by surface sponging or splashing, accompanied by fanning either by hand or mechanical means. This should be continued throughout transportation to an emergency room receiving facility as well. Always transfer heat stroke victims to a medical facility.



Heat can be fatal to anyone, but people over 60 years old appear to be a higher risk for death from heat illness, especially if they are frail or have pre-existing heart disease, respiration problems or diabetes. To lesser extent, babies and young children, people with a history of alcoholism and others using certain drugs and medications are at high risk of heat illness. People most at risk of heat illness



from exertion may include; athletes, military personal, and manual labors.



### How can you avoid heat illness during excessive heat?

As record-breaking high temperatures are here to stay for a few months throughout Texas, the Texas Department of Health (TDH) has issued a list of precautions people can take to reduce the risk of heat exhaustion and heat stroke. All Texans are urged to follow these precautions.

- \* Drink two to five times more water and non-sugar, non-alcoholic beverages to replace fluids lost in perspiration.
- \* Wear loose-fitting, lightweight, light-colored clothing and wide brimmed hats while in the sun.
- \* Use sunscreen with an SPF-15 or more.
- \* Take frequent breaks limiting physical activity.
- \* Rest in a cool place.





- \* Stay in an air conditioned area if possible. If no air conditioning is available, fans are helpful.



- \* Use the buddy system between co-workers in high heat jobs.

- \* Older people should have a friend or relative check on them or call twice a day.



- \* When planning activities choose cooler hours to be outdoors.

- \* Before prolonged work or exercise outdoors, listen to weather forecasts and give special attention to advisories



### One Final Reminder

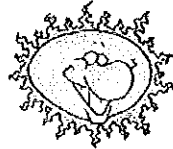
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### Animals



Animals are also susceptible to heat stroke, or hyperthermia, which is considered an emergency as it is with people.

Signs in animals include excessive panting, increased body temperature, heart rate, or respiratory rate, unusual salivation, collapse, stupor, seizures, or coma, redder than normal gums.

**Treatment**—get the animal out of the direct heat and spray it with cool water or place water-soaked towels on the head, neck, feet, chest and abdomen. Take the animal to the veterinary hospital. Animals can't explain their needs, so it is up to us to take extra care during hot weather conditions, to ensure their needs are met.



### Water Safety

Now that summer is here, we start looking for ways to stay cool. Several ways come to mind, but the one that most people enjoy is **WATER!** The following are some safety tips from the American Red Cross. Go have a big **SPLASH.**



- \* According to the American Red Cross learning to swim is the best thing anyone can



do to stay safe in and around water. Always swim with a buddy; never swim alone. The American Red Cross offers courses for people any age or swimming ability. To enroll in a swimming course, contact your local Red Cross Chapter today.

- \* Swim in areas supervised by a lifeguard or an adult. *(If swimming in a unit pool, use extreme caution as a lifeguard may not be present).*



- \* Read and obey all rules and posted signs.

- \* Children or inexperienced swimmers should take precautions, such as wearing a U.S. coast guard-approved personal floatation device when around water.



- \* Watch out for the dangerous "too's"-too tired, too cold, too far to swim.
- \* Set rules for the whole family to follow based on

swimming abilities.

- \* Be knowledgeable of the water environment you are in and the potential hazards, such as depth, currents, obstructions.

- \* Pay attention to weather conditions and forecasts. Get out of the water at the first indication of bad weather.



- \* Use a feet-first entry when entering the water.



- \* Enter headfirst only when clearly marked for diving.

**Don't Drink and DROWN**

- \* Do not mix alcohol with swimming, diving or boating. Alcohol impairs your judgment.

- \* Know how to prevent, recognize, and respond to emergencies.

- \* Knowing how and when to administer CPR in an emergency situation will save a life. Your local chapters of the American Heart Association, the American Red Cross, and local hospitals are good sources for finding a CPR course in your area. Taking a CPR class could help save a life-someday.



Go out and have a great summer with friends and family.



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TDCJ Risk Management's

# Training Circular

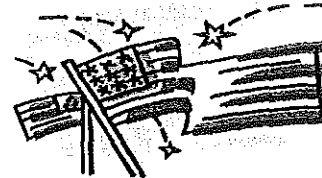
Volume 8 Issue 07

Risk Management Issues

July 2008



## July Hotter Than A Firecracker



In the United States, *Independence Day* or more commonly known as the *Fourth of July* is a federal holiday commemorating the adoption of the declaration of independence on July 4, 1776, declaring independence from the Kingdom of Great Britain and is only celebrated in the United States. We commonly associate July 4th with fireworks, parades, BBQ's, carnivals, picnics, baseball games, swimming, family reunions, and laying on a blanket looking up at the fireworks going Oohhhhhh and Aahhhhhh. Fireworks shows are held in many states, and many people will purchase them for their personal use. Safety concerns have led some counties to ban fireworks for several reasons. One reason is because personal injury and property loss, and the second reason is



because at this time of the year a lot of counties are under burn bans due to the lack of rain causing dry conditions. So, before you go and purchase fireworks, check with your local fire departments to see if your county is under a burn ban or firework ban, or if there might be a better location to display your fireworks. As we are driving down the road there are firework stands popping up everywhere, and suddenly from the back seat the kids come alive shouting they want sparklers. Many parents understand that firecrackers, bottle rockets, and Roman candles can cause injury to a small child, so we often buy the sparklers for the younger kids to play with because we think they are safer. But the truth is, sparklers can reach over 1000°F, and cause

half of the injuries to children under the age of five as well as 10 percent of the fireworks related injuries overall. Before you stop and buy those fireworks, let's discuss some of the injury risks associated with them:



- \* Over 10,000 people are treated in emergency rooms for injuries associated with fireworks.
- \* Almost half of the injuries are to children under the age of 15.
- \* Firecrackers cause the most injuries, followed by rockets and sparklers.
- \* Burns are the most common injuries from fireworks.
- \* Injuries from fireworks most often affect the hands, eyes, head, face, and ears.
- \* Tragic eye injuries result in a loss of vision or sometimes even complete eye loss.
- \* Severe burns to the hands, face, and arms, that require treatment beyond



first aid.



Some of these injuries can be a devastating price to pay for a few minutes of fun with fireworks.

The National Safety Council wants every American to have a safe holiday. They know that most of the reported firework related injuries can be avoided by following a few safety tips and responsible use of fireworks.

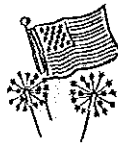


- \* Please treat fireworks with respect. Read all the cautions and warnings and use common sense. Lighting fireworks indoors, throwing them from automobiles or lighting multiple devices at the same time can lead to accidents and are not how fireworks are intended to be used. Always obey all local laws pertaining to the use of fireworks.
- \* If you see someone misusing fireworks, **STOP** them and show them the correct way to use consumer fireworks and do not ever use professional fireworks or illegal explosives.

- \* Remember to do your part and everyone will be safer.
- \* Only persons over 12 years of age should handle sparklers of any kind. Fireworks and alcohol do not mix. Have a designated "Shooter".

The injury rate on legal fireworks has declined over 84% since the Consumer Products Safety Commission began to closely monitor the firework industry. While usage continues to expand on an annual basis, the injury rate drops every year.

Fireworks are meant to be enjoyed, but you'll enjoy them much better knowing your family is safe. Take the extra precautions this holiday and you and your family will have a **blast!!**



### Hand Injuries

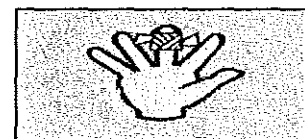
Hand injuries are a common injury when dealing with fireworks, but they are also a common injury within the workplace. Your hands are one of your most valuable tools, nothing has ever been invented that



can match them for usefulness and adaptability. That's why it's so important to learn how to protect your hands, both at work and home. One of the most common injuries within TDCJ are hand injuries. They range from being caught in, caught on, caught between, struck by or struck against.

There are several ways to prevent hand injuries. One of the best ways is to be **observant**.

- \* **Keep** hands away from pinch points and crushing hazards. Pinch points and crushing hazards are everywhere. **Keep** the safety of your hands in mind at all times.
- \* Inspect materials for slivers, jagged edges, burrs, rough or slippery surfaces before handling. Put on gloves or take other precautions to protect your hands. Wipe off greasy, wet, slippery, and dirty objects before handling.
- \* Use the correct hand tool for the job and use it properly.
- \* **Always** wear required personal protective equipment when working with hand tools.





- \* Wear suitable gloves when the job calls for it. But never wear gloves when working around revolving machinery. Gloves take only a few seconds to put on and they protect you from a variety of hazards. Make sure they fit properly. If they are too big that can catch on things. If they are too small they can restrict movement. Remember the old saying, "Fits like a glove".
- \* **Don't** wear rings or bracelets when working on or with machines, tools, or other equipment
- \* Make sure that all safety guards are in place before you begin the job.
- \* **Never** reach into the machinery to repair, oil, or adjust without taking the required lockout/tag out steps.
- \* Clean up with a rag or a brush - **Not** with your fingers or hands.
- \* Keep your hands clean and **Don't** ignore any hand injury.
- \* **Always** use handles on doors, gates, and barricades.
- \* Concentrate on what you're doing. Think about your hands and guard them every minute.



*Before you begin a job, ask yourself; "What must I do to protect my hands?"*

### Eye Injuries

"An eye injury can be a life-altering event." According to the United States Eye Registry, approximately 12,000 Americans are treated in emergency rooms annually for firework-related injuries, and approximately 2,000 of these injuries involve the eye. Despite many of the advances made in eye surgery, repair of the severely injured eye remains a challenge. Always use extreme caution when using fireworks and watch bystanders



According to the National Institute for Occupational Safety and Health (NIOSH) each day about 2,000 U.S. workers have a job-related eye injury that required treatment. About one third of these injuries are treated in a hospital emergency room and more than 100 of these injuries result in one or more days of lost work. The majority of these injuries result from small particles or objects striking the eye. Examples include metal, slivers, wood chips, dust and cement chips that are ejected by tools, blowing wind, or falling



from above. Some objects such as nails, staples, slivers of wood, or metal penetrate the eyeball and result in a permanent loss of vision. Large objects may also strike the eye or a worker may run into an object causing blunt force trauma to the eye.

Experts believe that the right eye protection and taking these extra precautions could have lessened the severity or even prevented 90% of eye injuries.

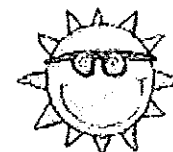
*Before you begin a job, ask yourself; "What must I do to protect my eyes?"*

### *What is my best defense against an eye injury?*

- \* Know the eye safety dangers of the items you will be working with.
- \* Eliminate hazards before starting work.
- \* Always use guards.
- \* Wear proper eye protection.

### *When should I protect my eyes at work and home?*

You should wear safety eye-wear whenever there is a chance of eye injury. Anyone working in or passing through



areas that pose eye hazards should also wear eye protection.



*What type of safety eyewear should I wear?*

The type of safety eye protection you should wear depends on the hazard associated with the task. Safety eyewear protection includes some of these items.

- \* Non-prescription and prescription safety glasses
- \* Goggles
- \* Face shields
- \* Welding helmets
- \* Full-face respirators

*Other Outdoor Safety Concerns*

**Outdoor Burning**



It's time to clean the yard for all the outdoor activities that you have been planning. The unit field force squads will be turning out to help with maintaining the unit grounds and agriculture pastures. Now your thinking "What am I going to do with the debris?" Safe disposal of household trash, leaves, brush piles, and construction debris will eliminate a major wildfire threat and reduce the amount of fuel available in the event of a fire. If you must burn debris, do it safely. Careless trash and debris burning ignites a tremendous number of wildfires

every year in Texas, accounting for more than three-fourths of all wildfires in some regions of the state. Most people never intend to start a wildfire, but even the best of intentions can produce disastrous results when safety precautions aren't taken. Texans owe it to themselves and their neighbors to help prevent accidental wildfires from occurring. Observe the fire safety tips outlined below.



- \* Check local laws and ordinances for burn bans.
- \* Consider alternatives to burning.
- \* Don't burn outdoors during dry windy weather or when vegetation in the vicinity is dry.
- \* Before you burn, contact the local fire department to notify them of your plans.
- \* Stay with your fire.
- \* Consider composting or mulching.
- \* Establish wide fire-breaks around burning area.
- \* Keep water and equipment handy.



**Outdoor Grilling**

Summer brings the season for us to grill those hamburgers, hot dogs, and can you smell that brisket.

Can't wait to eat.

Here are some safety tips to consider.

- \* Keep grills away from combustibles.
- \* Allow coals to burn out completely and let ashes cool 48 hrs. before disposing.
- \* Dispose of ashes in heavy duty aluminum foil

*Happy July 4th*

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## TDCJ Risk Management's *Training Circular*

Volume 7 Issue 05

Risk Management Issues

May 2007

# **KEEPING IT "ON THE COOL"**



Well, it's really no secret. It gonna' get hotter! There's nothing we can do to prevent it. What we can do, however, is be aware of the hazards of working in the heat and take preemptive measures to keep ourselves off the "injury statistics page."

### **A National Problem**

Heat kills by taxing the human body beyond its abilities. In a normal year, about 175 Americans succumb to the demands of summer heat. Among the large continental family of natural hazards, only the cold of winter — not lightning, hurricanes (*excluding Katrina and Rita*), tornadoes, floods, or earthquakes — takes a greater toll. In the 40-year period from 1936 through 1975, nearly 20,000 people were killed in the United States by the effects of heat and solar radiation. In the disastrous heat wave of 1980, more than 1,250 people died.

### **How Heat Affects the Body**

Human bodies dissipate heat by

varying the rate and depth of blood circulation, by losing water through the skin and sweat glands, and — as the last extremity is reached — by panting, when blood is heated above 98.6 degrees. The heart begins to pump more blood, blood vessels dilate to accommodate the increased flow, and the bundles of tiny capillaries threading through the upper layers of skin are put into operation. The body's blood is circulated closer to the skin's surface, and excess heat drains off into the cooler atmosphere. At the same time, water diffuses through the skin as perspiration. The skin handles about 90 percent of the body's heat dissipating function.

Sweating, by itself, does nothing to cool the body, unless the water is removed by evaporation — and high relative humidity retards evaporation. The evaporation process itself works this way: the heat energy required to evaporate the sweat is extracted from the body, thereby cooling it. Under conditions of high temperature (above 90 degrees) and high relative humid-

ity, the body is doing everything it can to maintain 98.6 degrees inside. The heart is pumping a large volume of blood through dilated circulatory vessels; the sweat glands are pouring liquid — including essential dissolved chemicals, like sodium and chloride — onto the surface of the skin. If this moisture is not evaporated, the body cannot effectively dissipate excess internal heat which leads to heat related illnesses.

### **Heat Related Emergencies**

Overexposure to the sun or heat can lead to cramps, exhaustion and even death. Proper protection is essential for preventing heat and sun related illness. Prevention is simple, effective and by far preferable to treatment. Proper prevention measures significantly reduce probability of sun related illness. The following actions in identify-

ing and reacting to the signs of heat related illness could mean the difference between life and death.

#### The Sun and Radiation

Over-exposure to the sun's ultraviolet rays can have detrimental effects on your skin. Here are some tips you may follow to reduce the risks of skin cancer:

- Avoid midday sun (10:00am to 4:00pm)
- Apply a waterproof sunscreen (SPF of 15 or greater)
- Wear tightly woven clothing to block the sun's UV rays
- Wear a broad brimmed hat to shadow face, neck and ears

Also keep in mind that:

- Sunlight reflected from water (lakes and ponds) and concrete increases the intensity of light on your skin
- Light cloud cover will not block or protect you from ultraviolet sunlight
- Water does not filter most ultraviolet light, thus being underwater (e.g. Snorkeling) will not protect you from the sun.

#### Heat Related Illness

Overexposure to heat, humidity or over exertion of the body can lead to heat related illness. This usually takes one of three forms:

#### Heat Cramps

Heat cramps occur most commonly in the most worked muscles after heavy exercise in the heat. A high level of humidity, recent ingestion of alcohol, or being over the age of forty may increase the likelihood of heat cramps.

#### Treatment for Heat Cramps

- \* Remove the patient from the hot environment. Take the patient into the shade or into a cool sheltered area.
- \* Have the patient sit or lie down to rest the cramping muscles.
- \* The patient should attempt to gently stretch the affected muscles.
- \* Encourage the patient to drink orange or tomato juice, a soft drink or a commercially available sodium balanced thirst quencher. Do not give liquids to a patient who is unconscious or not alert.
- \* Remove any sweat with a damp cloth.

Notify your supervisor and the Medical Department of the incident. If this occurs away from work and the patient does not get better within 30 minutes, seek further medical attention. Dial 911 if necessary and ask for an ambulance. The paramedic dispatcher will give you further instructions.

Do not provide the patient with more water since this may further dilute the salt levels in the body. It is also not advisable to give the patient a salt water mix or salt tablets since these may have other negative effects on the patient.

#### Heat Exhaustion

Excessive loss of bodily fluids due to prolonged sweating, especially in a hot environment, can lead to heat exhaustion.

#### Symptoms of Heat Exhaustion

- \* Headache
- \* Fatigue
- \* Vomiting
- \* Nausea
- \* Thirst
- \* Giddiness
- \* Profuse sweating

The patient is usually cold and damp to the touch and skin may appear pale.

#### Treatment of Heat Exhaustion

- \* Remove the patient from the hot environment. Take the patient into the shade, or preferably, into a sheltered, air conditioned environment.
- \* Remove any extra clothing and loosen any clothing which is tight or restrictive.
- \* Urge the patient to lie down.
- \* If the patient is conscious and alert, provide suitable fluids such as tomato or orange juice,

soft drinks or other commercially available sodium balanced thirst quenchers.

Notify your supervisor and the Medical Department. Further medical attention is highly recommended. If this happens away from work, dial 911 and ask for the ambulance. The paramedic dispatcher will give you further instructions.

#### Heat Stroke

Heat stroke occurs when the body is subjected to more heat than the body can possibly handle. Heat stroke is a serious medical condition and may lead to death without immediate emergency medical attention. In heat stroke, body temperature rises too quickly resulting in the death of body tissue. Signs to look for in a heat stroke patient include:

- Chills
- Nausea
- Vomiting
- Throbbing in the head
- Disorientation
- Slowing down of sweating

#### Treatment of Heat Stroke

The patient's life depends on rapid emergency medical care. Immediately notify your supervisor and the Medical Department. If this occurs away from work, dial 911 and ask for an ambulance. The paramedic dispatcher will give you further instructions. The patient's body must be cooled as rapidly as possible. Remove the patient from the hot en-

vironment and remove any excessive clothing while waiting for the ambulance.

#### Heat Illness Prevention

**Slow down.** Strenuous activities should be reduced, eliminated, or rescheduled to the coolest time of the day. Individuals at risk should stay in the coolest available place, not necessarily indoors.

**Dress for summer.** Lightweight, light-colored clothing reflects heat and sunlight, and helps your body maintain normal temperatures.

**Put less fuel on your inner fires.** Foods (like proteins) that increase metabolic heat production also increase water loss.

**Drink plenty of water.** Your body needs water to keep cool. Drink plenty of fluids even if you don't feel thirsty. Persons who (1) have epilepsy or heart, kidney, or liver disease, (2) are on fluid restrictive diets, or (3) have a problem with fluid retention should consult a physician before increasing their consumption of fluids.

#### One final reminder

Heat related illnesses can strike anyone in any occupation. The occupations from which heat related injuries are reported to Risk Management range from field security staff working outdoors in the sun to administrative staff

working indoors at a cubicle. So, remember, drink plenty of liquids to keep your body hydrated and *stay cool!*

Training Circular  
TDCJ Risk Management Department  
Volume 07 Number 05  
May 2007

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The *Training Circular*, a publication of the Texas Department of Criminal Justice Risk Management Department, is published monthly in effort to promote and enhance risk management awareness on issues relating to TDCJ employees. Design and layout of the *Training Circular* is performed by David Scholwinski, Operations Manager, Risk Management. Comments, suggestions and safety related items are welcome. Send suggestions to:

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